

Every month in Utah, 24 individuals die from prescription opioid overdoses.



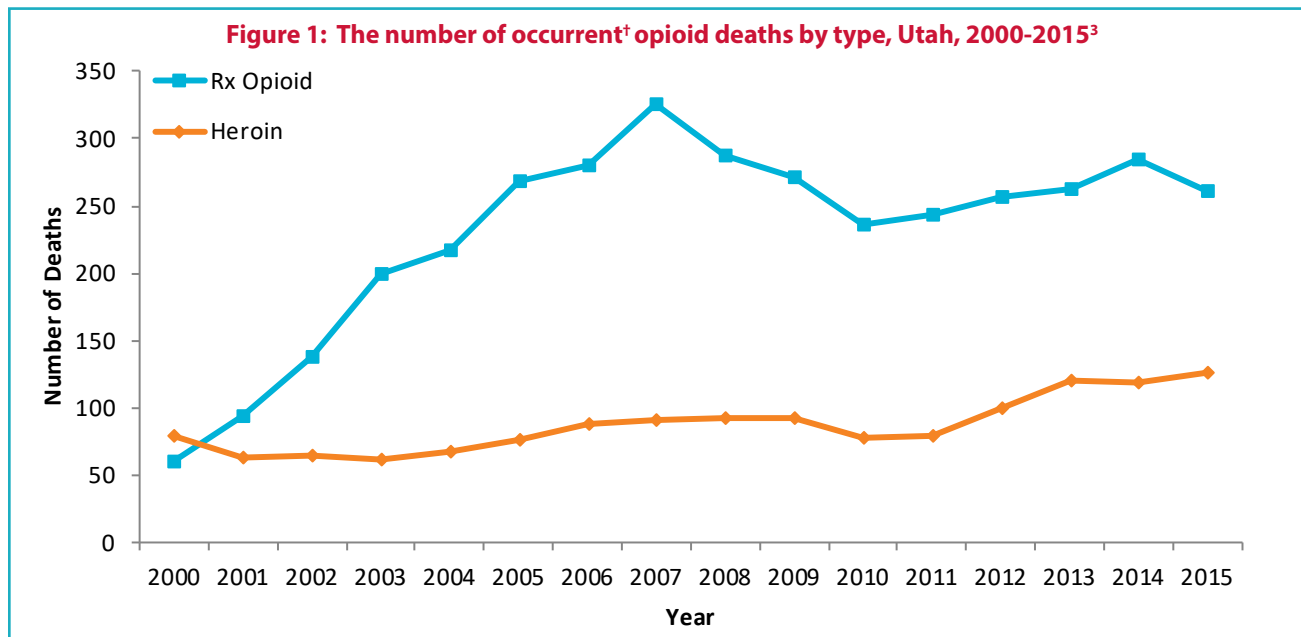
Introduction

- From 2013 to 2015, Utah ranked 7th highest in the nation for drug overdose deaths.¹
- Drug poisoning deaths are a preventable public health problem that has outpaced deaths due to firearms, falls, and motor vehicle crashes in Utah since 2002.²
- In 2015, 24 individuals (residents and non-residents) died every month from a prescription opioid overdose in Utah ([Table 1](#)).³
- 2015 was the first time in six years that there was a decrease in the rate of prescription opioid deaths ages 18 years and older in 2015 ([Table 1](#)).
- Although Utah is seeing a decrease in the number of prescription opioid deaths since 2010, the number of heroin deaths that have increased in the same time period ([Figure 1](#)).³

Table 1. Count and rate of poisoning deaths by select categories, Utah, 2006-2015³

Year	Occurent [†] Poisoning Deaths	Occurent [†] Rx Drug Deaths	Occurent [†] Rx Opioid Deaths	Rx Opioid Deaths, UT Residents 18+	Rx Opioid Death Rate per 100,000 UT Residents 18+	95% Confidence Interval
2006	416	308	280	274	15.8	(14.0 - 17.8)
2007	478	371	326	313	17.6	(15.7 - 19.6)
2008	430	321	289	278	15.2	(13.5 - 17.1)
2009	420	306	272	269	14.4	(12.7 - 16.2)
2010	369	278	236	227	11.9	(10.4 - 13.6)
2011	444	306	246	233	12.0	(10.5 - 13.7)
2012	536	327	268	257	13.1	(11.5 - 14.8)
2013	531	354	274	265	13.2	(11.7 - 14.9)
2014	531	363	301	285	14.0	(12.4 - 15.7)
2015	566	357	282	262	12.6	(11.1 - 14.2)

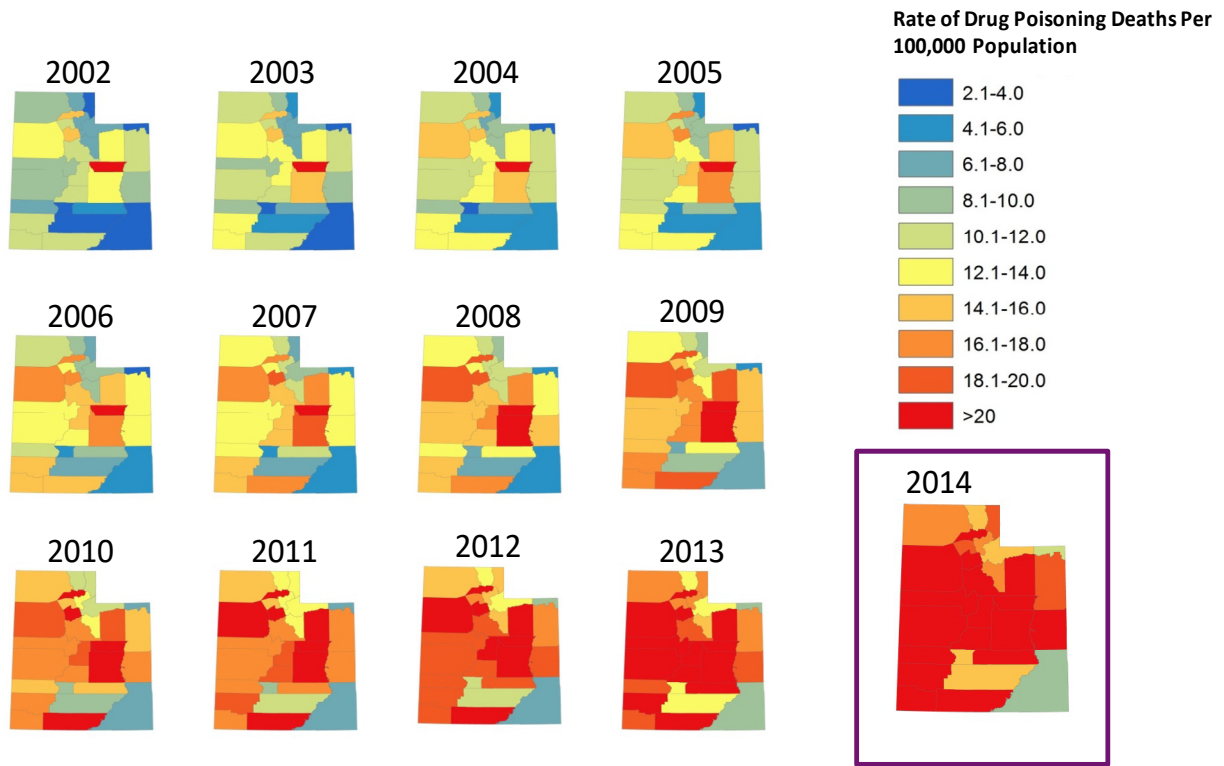
Figure 1: The number of occurrent[†] opioid deaths by type, Utah, 2000-2015³



Utah Trends

Since 2002, drug poisoning deaths per 100,000 population have increased at an alarming rate (Figure 2) and prescription opioids have been responsible for more drug deaths in Utah than all other drug categories, such as benzodiazepines, over-the-counter medications, or illicit drugs.¹

Figure 2. Rate of drug poisoning deaths per 100,000 population by county, Utah, 2002-2014 (age-adjusted)³



Age and Sex

Overall, there was not a significant difference between the adult male and female rate of prescription opioid overdose deaths (13.0 and 13.4 per 100,000 adults) (Figure 3). The highest prescription opioid overdose deaths rates were observed in Utahns aged 45-54 for both males and female (Figure 3).³ The highest prescription opioid overdose emergency department visits rates were observed among Utahns aged 25-34, closely followed by Utahns aged 45-54. However, for heroin overdose emergency department visits, the highest rates were observed for Utahns aged 18-24 (Figure 4).²

Figure 3: Rate of prescription opioid overdose deaths per 100,000 adult residents by sex, Utah, 2013-2015³

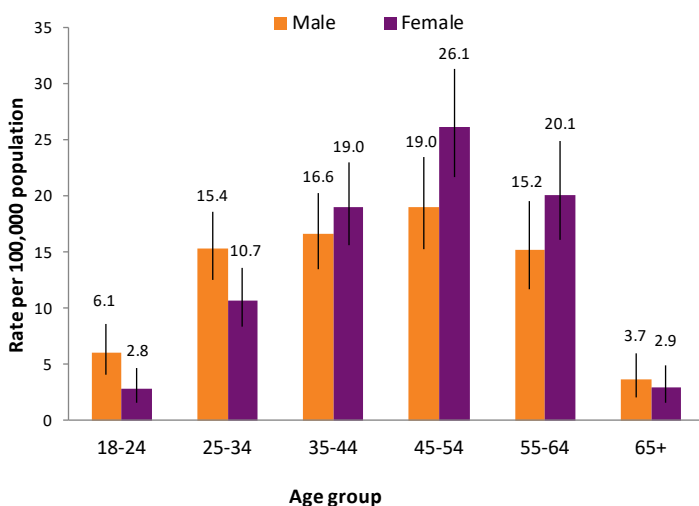
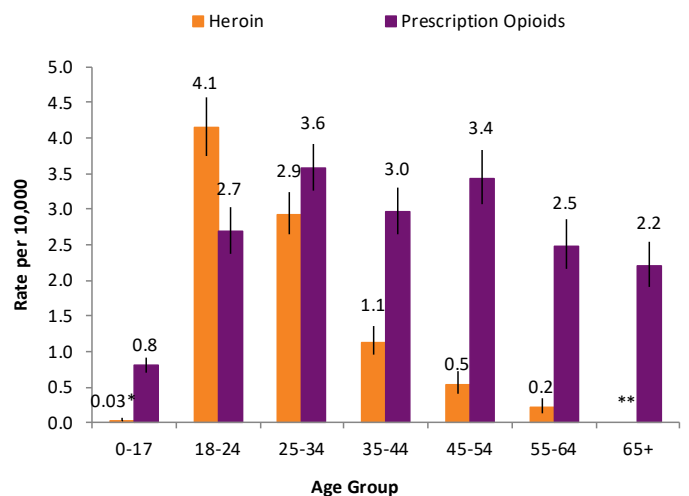


Figure 4: Rate of emergency department visits per 10,000 population by age group and opioid type, Utah, 2012-2014²



*Use caution when interpreting results, data does not meet UDOH standard for data reliability.
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Figure 5: Percent of occurrent[†] prescription opioid deaths by drug type, Utah, 2015³

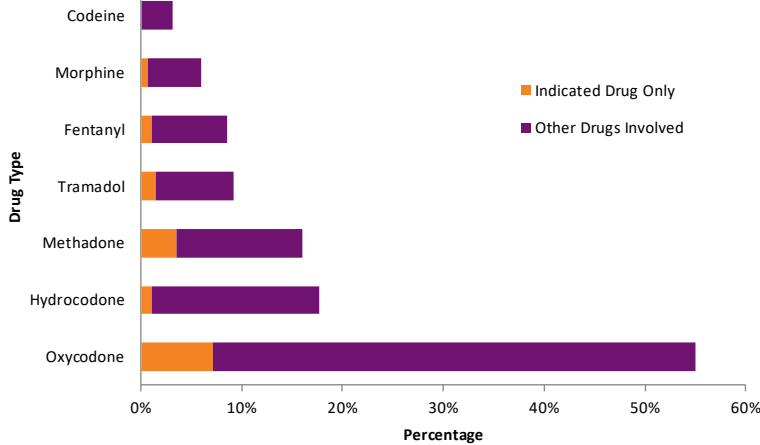


Figure 6: Rate of occurrent[†] deaths per 100,000 prescriptions by year and prescription type, Utah, 2004-2015⁵

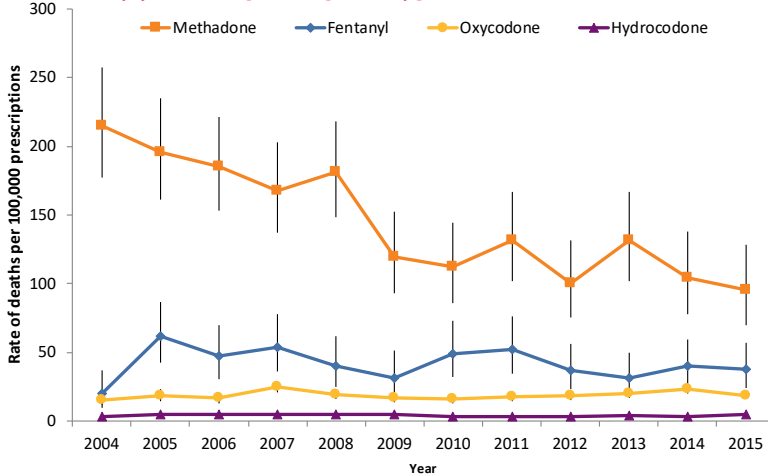
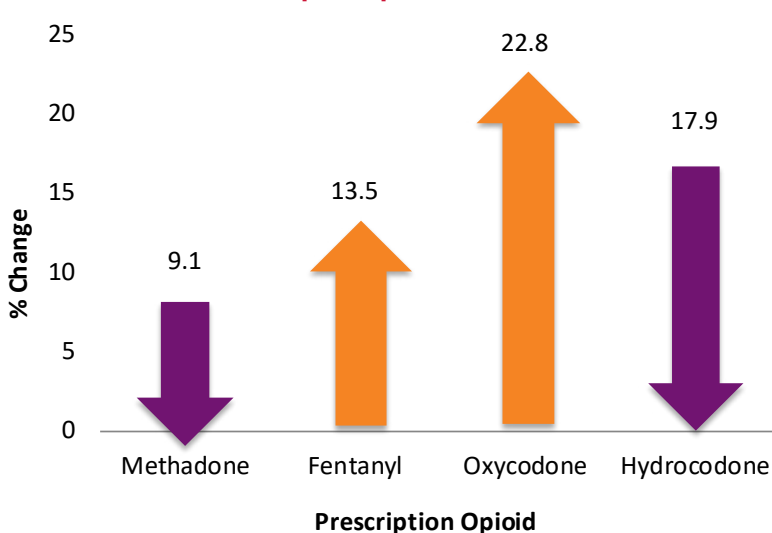


Figure 7: Percent change in number of deaths per 100,000 prescriptions, 2011-2015⁵



Prescribing Trends

Deaths from oxycodone drugs, such as oxycontin and percocet, accounted for 55.0 percent of all prescription opioid deaths in 2015. Hydrocodone was second at 17.7 percent. The majority of prescription opioid deaths involved other drugs (Figure 5).³

Although the majority of prescription opioid deaths involved oxycodone, the risk of death was significantly higher when methadone was involved compared to fentanyl, oxycodone, and hydrocodone. Fentanyl had the second highest risk of death per 100,000 prescriptions (Figure 6). Prescriptions dispensed for fentanyl and oxycodone increased 13.5 and 22.8 percent respectively from 2011 to 2015. Prescriptions for methadone and hydrocodone decreased 9.1 and 17.9 percent respectively during the same time period (Figure 7).⁵

Location of Death

The following Utah Small Areas had significantly higher prescription opioid death rates compared to the state (13.2 per 100,000 adults):³

- Carbon/Emery Counties (47.3 per 100,000 adults)
- Ogden (Downtown) (31.6 per 100,000 adults)

Circumstances of Death

In Utah, the top circumstances observed in prescription opioid deaths included:⁴

- 71.0% physical health problem
- 68.3% substance abuse problem†
- 65.7% current mental health problem
- 60.4% current mental health/substance abuse treatment
- 27.4% drug involvement (not a prescription)
- 17.1% alcohol dependence/problem
- 13.7% history of suicide attempts

Prevention

- Talk to your doctor about alternatives to prescription opioids.
- Never share your prescription opioids with anyone.
- Store prescription opioids out of reach, with the label attached, and with the child-resistant cap secured.
- Dispose of all unused and expired prescription opioids properly. If possible, take your unused prescription opioids to a permanent collection site or drop-off event. If you can't find a drop-off site, dispose of your medications by following the guidelines at www.useonlyasdirected.org.
- For other tips on safe use, safe storage, and safe disposal, visit Use Only As Directed at www.useonlyasdirected.org.
- Know what the common opioids are and know their risks – dependency, addiction, or overdose.
- Know what the signs of an opioid overdose are:
 - Small, pinpoint pupils
 - Blue/purple fingernail and lips
 - Won't wake up, limp body
 - Shallow or stopped breathing
 - Faint heartbeat
 - Gurgling or choking noise
- Carry naloxone and know how to properly administer it. Visit naloxone.utah.gov for more information.
- For more information on the risks of opioid, signs of an opioid overdose, or the use of naloxone, visit Stop the Opidemic at www.opidemic.org.

Resources

- Naloxone naloxone.utah.gov
- Stop the Opidemic opidemic.org
- Use Only As Directed: www.useonlyasdirected.org
- Utah Department of Health: www.health.utah.gov/vipp
- Utah Poison Control Center: uuhsc.utah.edu/poison 1-800-222-1222.

Last Updated: April 2017

References

1. U.S. Centers for Disease Control and Prevention, Web-based Injury and Statistics
2. Utah Department of Health Office of Public Health Assessment, Indicator Based Information System for Public Health
3. Utah Department of Health Violence and Injury Prevention Program, Prescription Pain Medication Program Database
4. Utah Department of Health Violence and Injury Prevention Program, Utah Violent Death Reporting System
5. Utah Department of Commerce Division of Occupational and Professional Licensing, Controlled Substance Database

*Occurrent deaths include individuals who died in Utah, whether or not they were a resident of Utah.

†Utah resident status not available to report counts and rates.

‡A circumstance in which the individual was noted as using illegal drugs, abusing prescription medications, or regularly using inhalants at the time of death even if the addiction or abuse is not specifically mentioned.



If your life has been affected by opioids, the Utah Department of Health wants to hear from you. Share your story with the Utah Health Story Bank at www.health.utah.gov/bhp/sb/.

Our Mission: VIPP is a trusted and comprehensive resource for data and technical assistance related to violence and injury. This information helps promote partnerships and programs to prevent injuries and improve public health.

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