

PRESCRIPTION DRUG OVERDOSE PREVENTION *in* **KENTUCKY**



THE STATE RESPONSE:

- ▶ After reading a 2003 series of *Lexington-Herald Leader* news stories chronicling the extent of prescription drug abuse in Kentucky and a state public health alert on the topic, the US congressman representing Kentucky's 5th District secured federal funding to establish Operation UNITE—a nonprofit organization working to rid 32 Kentucky counties of illegal drug use through Unlawful Narcotics Investigations, Treatment and Education (UNITE).
- ▶ In 2011, the state's injury prevention program—housed in the University of Kentucky College of Public Health was invited by CDC to participate in a joint CDC/National Conference of State Legislatures (NCSL) meeting addressing injury prevention through policymaking. The Kentucky delegation—which also included the director of the state Office of Drug Control Policy; manager of Kentucky's Prescription Drug Monitoring Program (PDMP), the Kentucky All Schedule Prescription Electronic Reporting (KASPER) system; director of Operation UNITE; state legislators; and other key stakeholders—crafted an action plan focusing primarily on drug overdose prevention.
- ▶ In 2012 state legislation was enacted addressing many of the components of the plan developed by the team that attended the CDC/NCSL meeting, including: 1) mandatory KASPER registration and use by controlled substance prescribers and dispensers, 2) a requirement that pain management clinics be owned by licensed physicians, 3) licensure standards for practitioner-owned pain management clinics (a responsibility of the medical licensure boards), 4) licensure standards for grandfathered non-physician-owned pain management clinics (a responsibility of the Kentucky Office of Inspector General), and, 5) prescribing guidelines for Schedule II and Schedule III controlled substances containing hydrocodone.

SUCCESSES:

- ▶ The number of deaths involving pharmaceutical opioids decreased from 538 in 2011 to 471 in 2012, the year the prescription drug law was enacted; the number of deaths involving benzodiazepine, an anti-anxiety drug, fell from 430 to 362 in the same time frame.
- ▶ The number of registered KASPER accounts rose from 7,545 in December 2011 to 23,960 at the end of February 2013, representing at least 90% of eligible prescribers.
- ▶ Since the state prescription drug bill was passed in April 2012, the number of pain management clinics in Kentucky has fallen from 44 to 25.
- ▶ Kentucky prescribers are now required to query the PDMP when initially prescribing a Schedule II or Schedule III drug containing hydrocodone, to check the PDMP every three months for patients using such drugs, and to review PDMP information before prescribing refills.
- ▶ From 2012 to 2013 overall dispensing of controlled substances declined from 7.39 million doses to 6.76 million doses, an 8.5 percent drop.

THE PROBLEM:

- ▶ **Between 2000 and 2013, the number of drug overdose deaths in Kentucky rose from 246 (6.1 per 100,000 population) to 1,019 (23.2 per 100,000 population). The state now has third highest drug overdose death rate in the United States. Most drug overdose deaths involved prescription drugs.**
- ▶ **One in five teens in Kentucky has used prescription drugs nonmedically.**
- ▶ **The drug overdose death rate surpassed that of motor vehicle-related deaths in 2008, and remains the leading cause of injury death in Kentucky.**

"Pills such as Lorcet, Lortab and Vicodin—as easy to find in the hill country as dogwoods in spring—are the drugs of choice in a region swamped with prescription narcotics. The pills all share the same ingredient: hydrocodone, an opium derivative that flows into Eastern Kentucky at a higher per capita rate than anywhere else in America."

— **Lexington-Herald Leader**
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