Opioid Misuse and Death

DESCRIPTION
Opioid misuse includes the misuse of prescription opioid pain relievers or the use of heroin. Prescription drug misuse is second only to marijuana use as the most commonly used illicit drug. Even if the reason for misuse was to relieve physical pain (the most common reason), use without a prescription of one’s own or use at a higher dosage or more often than prescribed constitutes misuse. Although prescription drug misuse is common in the U.S., most people (87.2 percent) who take prescription pain relievers do not misuse them.1 The current opioid epidemic in the U.S. is so far-reaching that it is an important factor contributing to the declining life expectancy of the nation.2 Fatal and non-fatal overdoses are key indicators of the scope and lethality of the opioid epidemic.

HOW WE ARE DOING
Between 2008 – 2016, deaths in Minnesota related to opioid increased from 226 to 395, while in Ramsey County these deaths increased from 24 to 34. During that same time, heroin-related deaths in Minnesota increased from 8 to 150, in Ramsey County, these deaths increased from 2 to 13.3 For every drug overdose that results in death, there are many more nonfatal overdoses. In 2016, the rate of nonfatal opioid-related emergency department visits among Ramsey County residents was at its lowest level in the past five years, 70.2 per 100,000 residents,4 and opioid prescribing rates in Ramsey County are at their lowest in the past 10 years (499 per 1000 residents).5 About 5 percent of Ramsey County 11th graders reported using prescription pain relievers not prescribed for them in 2016. Data from 2017 crime reports show that Ramsey County has the lowest rate of drug abuse crimes than the other Twin Cities metro counties (225 per 100,000 population). The number of arrests in Ramsey County for opioid and synthetic narcotics have decreased from 681 in 2013 to 537 in 2017 (which was 41.1 percent of all the total drug arrests).6

DISPARITIES
The number of white Minnesotans who die from opioid overdoses is higher than others, but Native American and African-American communities die from opioid overdoses at higher rates. In 2015, Minnesota ranked first among all states when measuring the disparity-rate ratio of deaths due to drug overdose among African-Americans and American Indians relative to whites. Data from 2016 show the disparity has continued and worsened. The realities of poverty, racism, classism, social isolation, sexual exploitation and other social inequities affect people’s vulnerability to and capacity for effectively dealing with drug-related harms.7,8

RISK FACTORS
Individuals in physical pain with access to prescription pain relievers are most at risk for opioid misuse. Challenges in safe storage and disposal of prescriptions also contribute to the opioid crisis. Most patients fail to store opioid in locked locations, including those with children and adolescents who are particularly vulnerable to risks of opioid misuse and

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4 Saint Paul – Ramsey County Public Health data set.
overdose. Over half of people who report non-medical use of prescription opioids state their most recently used drug came from a friend or family member.9

WHAT RAMSEY COUNTY GOVERNMENT IS DOING

The Minnesota Department of Human Services is the designated authority for alcohol and drug abuse prevention and treatment. There are many activities in Minnesota’s Opioid Action Plan10 that aim to address opioid misuse and death (e.g., patient and provider education, monitoring prescribing practices, and increasing access to medications used to reverse the toxic effects of an overdose). Minnesota is one of 39 states that allows individuals to administer Naloxone to a person without being subject to liability or prosecution. Increasing access to treatment for individuals with opioid use disorder is imperative, together with a substantial program of research to develop new non-addictive treatments for pain.11

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