The 2023 Delaware Epidemiological Profile

Substance Use, Mental Health, and Related Issues:

Opioids
The Delaware 2023 Epidemiological Profile: Substance Use, Mental Health, and Related Issues

is prepared for

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&
The Delaware State Epidemiological Outcomes Workgroup

The annual Delaware State Epidemiological Profile is a valuable data resource for strategic planning, decision-making, and evaluation. The report includes modules that highlight indicators of mental health and wellbeing, patterns of substance use and its consequences, and risk and protective factors for people in Delaware. The report also highlights crosscutting issues that warrant attention as well as populations that may experience disproportionate risk for these concerns.

This module is part of a series of materials. To review the Annual Epidemiological Profile Companion Guide (which includes data notes), modules on additional topics, downloadable slides, and infographics, please visit the UD Center for Drug and Health Studies Delaware Epidemiological Reports page. Links to presentations referenced in the annual profile are available from the Presentations webpage.

The SEOW is facilitated by a team at the Center for Drug and Health Studies at the University of Delaware that convenes a network of more than 100 representatives from approximately 55 state and nonprofit agencies, community organizations, advocacy groups, and other entities. The SEOW’s mission is to bring data on behavioral health and associated issues to the forefront of prevention and treatment efforts in Delaware. To learn more, please visit the What is the SEOW? webpage.
Opioids

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Opioids

Opioids include prescription pain medication (e.g., fentanyl, morphine, hydrocodone, and oxycodone, etc.) as well as heroin. Aggressive marketing and changes in prescribing practices that began in the 1990s contributed to increased opioid access, use, and a dramatic rise in overdoses. U.S. Overdose deaths involving synthetic opioids (other than methadone) have surged since 2014 (Center for Drug and Health Studies, 2022).

The risk of overdose increases when opioids are used at the same time as other substances, such as benzodiazepine medications (e.g., Valium or Xanax). There has been a rise in the prevalence of xylazine in combination with fentanyl and other illicit drugs and in overdoses (Bebinger, 2022; Reed et al., 2022). Recently, there has been a substantial rise in overdose deaths involving opioids used simultaneously with cocaine and/or other psychostimulants; in 2019, three out of four deaths involving cocaine also involved an opioid (Hedegaarde, Minino, & Warner, 2021).

Delaware continues to suffer the impact of the opioid epidemic. According to the Centers for Disease Control and Prevention’s (CDC) State Unintentional Drug Overdose Reporting System (SUDORS), Delaware’s 2021 drug overdose mortality rate involving any opioid was 48.9 deaths per 100,000 residents, an increase from 44.4 per 100,000 residents the previous year. Delaware’s rate ranks third among the 32 jurisdictions reporting and substantially higher than the national rate of 28.1 deaths per 100,000 (CDC, n.d.). In the first quarter of 2023, Emergency Medical Services administered 903 Naloxone doses to 625 patients in Delaware who had overdosed (Delaware Drug Monitoring Initiative, 2023).

Fentanyl, a powerful synthetic opioid used for extreme pain and end-of-life care, is often illegally manufactured to look like prescription medication such as OxyContin and other pharmaceuticals (Drug Enforcement Agency, 2021). It is increasingly identified in overdose deaths in Delaware. In 2022, fentanyl was identified in 457 of 537 overdose deaths, compared to 57 that involved heroin (Delaware Division of Forensic Science, 2023).

In 2020, more than half (51%) of individuals admitted to publicly funded treatment programs in Delaware listed heroin as their primary drug. An additional 7% of treatment admissions were primarily attributed to use of other opiates (Treatment Episode Data Set [TEDS], 2020).

This overview of opioid use in Delaware draws upon recent data from the following sources:

- National Survey on Drug Use and Health
- Delaware School Survey
- Youth Risk Behavior Survey
- Delaware Prescription Monitoring Program

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1 Naloxone was recently approved for over-the-counter sale by the Food and Drug Administration (Lubell, 2023).
2 For additional TEDS data, please see the Other Illicit Drug module of the 2023 Epidemiological Profile.
The National Survey on Drug Use and Health (NSDUH) annually provides a report with U.S. estimates and state comparisons for major substance use and mental health indicators.

The 2021 NSDUH estimates that 3.22% of Delawareans aged 12 and older misused opioids, defined in the survey as use of heroin or misuse of prescription pain relievers, in the past year. A similar estimate (3.21%) of misused prescription pain relievers was reported. The vast majority of respondents (85.19%) perceive that there is great risk related to trying heroin.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Total 12 or Older</th>
<th>AGE GROUP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past year opioid misuse</td>
<td>3.22</td>
<td>2.48</td>
</tr>
<tr>
<td>Past year prescription pain reliever misuse</td>
<td>3.21</td>
<td>2.53</td>
</tr>
<tr>
<td>Perceived great risk from trying heroin once or twice</td>
<td>85.19</td>
<td>57.34</td>
</tr>
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Figure 1: Opioid misuse and perceptions of great risk in Delaware by age group, NSDUH 2021

Due to changes in the survey methodology made during the COVID-19 pandemic, NSDUH guidance advises against comparing data collected in 2020 or later with data collected in 2019 or earlier. As a result, the NSDUH estimates presented here are based on only one year of data (2021) rather than the typical combined two-year estimates and are considered preliminary. With the following data, SAMHSA cautions: “Because 2021 state estimates are based on a single year of data, there is greater variance around the estimates than for the usual two-year estimates, particularly in small states and for uncommon outcomes.” Users of this data can visit the NSDUH State Data Tables for more documentation on methodology.

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3 Source: “2021 National Survey on Drug Use and Health: Model-Based Prevalence Estimates (50 States and the District of Columbia),” Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.
4 Estimates are based on a survey-weighted hierarchical Bayes estimation approach and generated by Markov Chain Monte Carlo techniques.
5 Respondents were classified as misusing opioids in the past year if they reported using heroin or misusing prescription pain relievers in the past year.
6 Prescription pain relievers are a type of prescription psychotherapeutic. Misuse of prescription psychotherapeutics is defined as use in any way not directed by a doctor, including use without a prescription of one’s own; use in greater amounts, more often, or longer than told; or use in any other way not directed by a doctor. Prescription psychotherapeutics do not include over-the-counter drugs.
Delaware School Survey (DSS)

The Delaware School Surveys (DSS) are state-funded annual surveys administered to 5th, 8th, and 11th grade public school students throughout Delaware. There are two versions of the survey, one for 5th grade students and a secondary version for 8th and 11th graders. The DSS are designed to provide estimates of youth substance use and related factors. DSS data are used for National Outcomes Measures as well as state and local program planning and evaluation. (For more information or to review the survey questionnaires and earlier reports, visit the DSS page of the University of Delaware Center for Drug and Health Studies website. Due to the data gap in 2020 as well as the changes in the methodology for the 2021-2022 administration due to the COVID-19 pandemic, results of the 2022 DSS should be compared with caution to previous survey results.)

![Prescription Pain Killer Misuse by Grade, DSS 2022](image)

Figure 2: Prescription pain killer misuse by grade, DSS 2022

In 2022, a number of students as young as 5th grade reported “pain killer” misuse at least once in their lifetime (3%) or within the past year (2%). Six percent of 8th graders reported such misuse in their lifetime and 4% reported misuse in the past year. Two percent of 8th and 11th graders reported that they had misused such a prescription in the past month.

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8 Students are asked how often they use “Pain killers (OxyContin, codeine, Percocet, Dilaudid, morphine, Tylenol III, Vicodin, Promethazine/cough syrup with codeine, or other pain medication) to get high.”

9 The number of 5th grade students who indicated past month use does not meet the threshold for data reporting (less than 30 students) and therefore the rate is not included in the graph.
A person’s perception of the risk associated with a behavior can be a protective factor. It is concerning that less than half of 5th and 8th grade students perceive the serious risk associated with the misuse of any drug (45% and 41%, respectively). The overall rate is slightly higher among 11th graders, with 54% perceiving great risk. There are minor differences across genders among 11th graders, with girls being most likely to perceive great risk (59%) and students who identify as nonbinary least likely (44%).

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10 In the 2022 DSS Secondary survey, students were asked to identify their gender as boy, girl, nonbinary, or to self-describe their gender. Data reported from the DSS by gender here reflects these three primary categories (boy, girl, and nonbinary/self-describe) and students’ responses are reported by their self-identified gender. As a result, the categories of “boy” and “girl” may include both cisgender and transgender students. For more detailed information about nonbinary and transgender students in the DSS, please visit the chapter on Gender and Sexuality.
Youth Risk Behavior Survey (YRBS)\textsuperscript{11}

The Youth Risk Behavior Survey (YRBS) is a CDC-funded survey that is administered in odd-numbered years to both national and state samples of students. The survey monitors various topics of health risk behaviors, including substance use. Delaware has participated in these surveys for over 20 years. The following figures highlight findings from the 2021 Delaware YRBS among middle and high school students.\textsuperscript{12}

<table>
<thead>
<tr>
<th>School Grade</th>
<th>Male (%)</th>
<th>Female (%)</th>
<th>Total (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>9th grade</td>
<td>9</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>10th grade</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>11th grade</td>
<td>4</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>12th grade</td>
<td>5</td>
<td>11</td>
<td>8</td>
</tr>
</tbody>
</table>

Figure 5: High school students who ever took prescription pain medicine\textsuperscript{13} without a doctor’s prescription or differently than how a doctor told them to use it, YRBS 2021

According to the 2021 YRBS, 8\% of high school students have taken a prescription pain medication either without a prescription or in a way other than prescribed at some point in their lifetime. There are differences across genders, with more than one in ten females reporting misuse compared to only one in twenty males. In 2021, lifetime rates of use were lowest among 12\textsuperscript{th} graders (4\%).


\textsuperscript{12} Until the 2023 YRBS data is analyzed, comparisons of the 2021 data to previous data should be avoided, as findings from the 2021 data may be an exception to ongoing trends. For a more detailed description of pandemic impacts on data collection as it pertains to the YRBS, please see the \textit{Companion Guide} accompanying this report.

\textsuperscript{13} Prescription pain medicine includes drugs such as codeine, Vicodin, Oxycontin, Hydrocodone, and Percocet.
Five percent of middle school students reported that they had misused a prescription pain medication at least once in their lifetime. Unlike the high school findings, there were no noticeable differences in rates reported by males and females. In 2021, 6th grade students reported a 4% rate of use which increased only slightly to 5% among 7th and 6% among 8th graders.

Delaware Prescription Monitoring Program

The Prescription Monitoring Program (PMP) in Delaware records information on all prescriptions for controlled substances. Figures 7 and 8 highlight data from the PMP.

The rate of Delawareans filling opioid prescriptions has declined from 204 per 1,000 people in 2015 to 124 per 1,000 in 2021, although this does represent a slight uptick since the rate of 122 per 1,000 reported in 2020. Additionally, the rates of immediate relief, long-acting/extended relief, and high-dose opioid prescriptions being filled have declined since 2012 (Delaware Department of Health and Social Services, n.d.). Another positive indicator is the decrease in the rate of people who filled an opioid and a benzodiazepine prescription in the same month (from 35 per 1,000 in 2012 to 19 per 1,000 in 2021).

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14 Source: Data collected for the Delaware Prescription Monitoring Program (PMP) and reported on the Delaware Department of Health and Social Services My Healthy Community Data Dashboard.
Figure 7: Trends in people filling opioid prescriptions in Delaware, any opioid prescription, PMP 2012-2021
Figure 8: Trends in people filling opioid prescriptions in Delaware, by prescription type, 2012-2021 (as a rate per 1,000 people)

High-dose refers to prescriptions of greater than or equal to 90 MMEs (Morphine Milligram Equivalents).
References and Data Sources

Bebinger, M. (2022). An animal tranquilizer is making street drugs even more dangerous. NPR. Retrieved from https://www.npr.org/sections/health-shots/2022/08/05/1114453468/animal-tranquilizer-street-drugs


Crisis Text Line. (n.d.) Delaware Data.


Substance Abuse and Mental Health Services Administration. (2023). “2021 National Survey on Drug Use and Health: Model-Based Prevalence Estimates (50 States and the District of Columbia).”