



*Older Adults and the Opioid
Epidemic
1/25/2018
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The Aging of North Carolina

- North Carolina ranks 9th nationally, both in total population and in the number of people 65 and older.
- In 2025, one in five North Carolinians will be 65 and older.
- By 2019, the state is estimated to have more people 60 and over than under 18 years.
- Our 65 and older population will increase in the next 20 years from 1.6 to 2.6 million. In the next two decades, the age group 75-84 will be the fastest growing segment and beyond 2030, the proportion of older adults 85 and over will increase as the baby boomer population moves into this age group.

Alzheimer's Association. 2017 Alzheimer's disease Facts and Figures. <http://www.alz.org/facts/>

North Carolina Office of State Budget and Management, population estimates and projections. <http://www.osbm.nc.gov/facts-figures/demographics>

North Carolina State Center for Health Statistics, BRFSS. <http://www.schs.state.nc.us/data/brfss/2016/>, Leading causes of death

Census Bureau. American Community Survey, 2016 one year estimate and 2012-2016 five year estimates. <https://www.census.gov/>

Reddy, Swarna. (2017)



Aging of NC 2016-2036

Ages	2016		2036		% Change 2016-2036
	#	%	#	%	
Total	10,155,942		12,440,324		22%
0-17	2,307,284	23%	2,569,024	21%	11%
18-44	3,620,014	36%	4,327,013	35%	20%
45-59	2,059,450	20%	2,250,672	18%	9%
60+	2,169,194	21%	3,293,615	26%	52%
65+	1,560,794	15%	2,603,271	21%	67%
85+	177,453	2%	367,617	3%	107%

Alzheimer's Association. 2017 Alzheimer's disease Facts and Figures. <http://www.alz.org/facts/>

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Reddy, Swarna. (2017) , NC DHHS, DAAS



Prevalence of Pain in Older Adults

- 1 in 5 older adults report experiencing pain
- 18% of adults over age 65 are taking pain medications regularly
- One-fifth of adults 65 years and older said they had experienced pain in the past month that persisted for more than 24 hours
- Almost three-fifths of adults 65 and older with pain said it had lasted for one year or more

CDC's National Center for Health Statistics 2006,
Patel, Pragnesh, (2010) *Pain Management in Elderly Patients [Power Point Slides]* Retrieved from
https://www.michigan.gov/documents/mdch/bhs_Pain_Management_In_Elderly_Patients2_318892_7.ppt.



Older Adults and Chronic (Persistent) Pain

- Older adults often experience chronic pain
- Pain experienced by older adults is more complicated than in younger persons
- Their chronic pain is often a result of several health conditions
- Pain in older adults is often undertreated

Galicia-Castillo, Marissa. (2016). Opioids for Persistent Pain in Older Adults. *Cleveland Clinic Journal of Medicine*, 83 (6), 443-451.

<https://www.mdedge.com/ccjm/article/109137/geriatrics/opioids-persistent-pain-older-adults#>



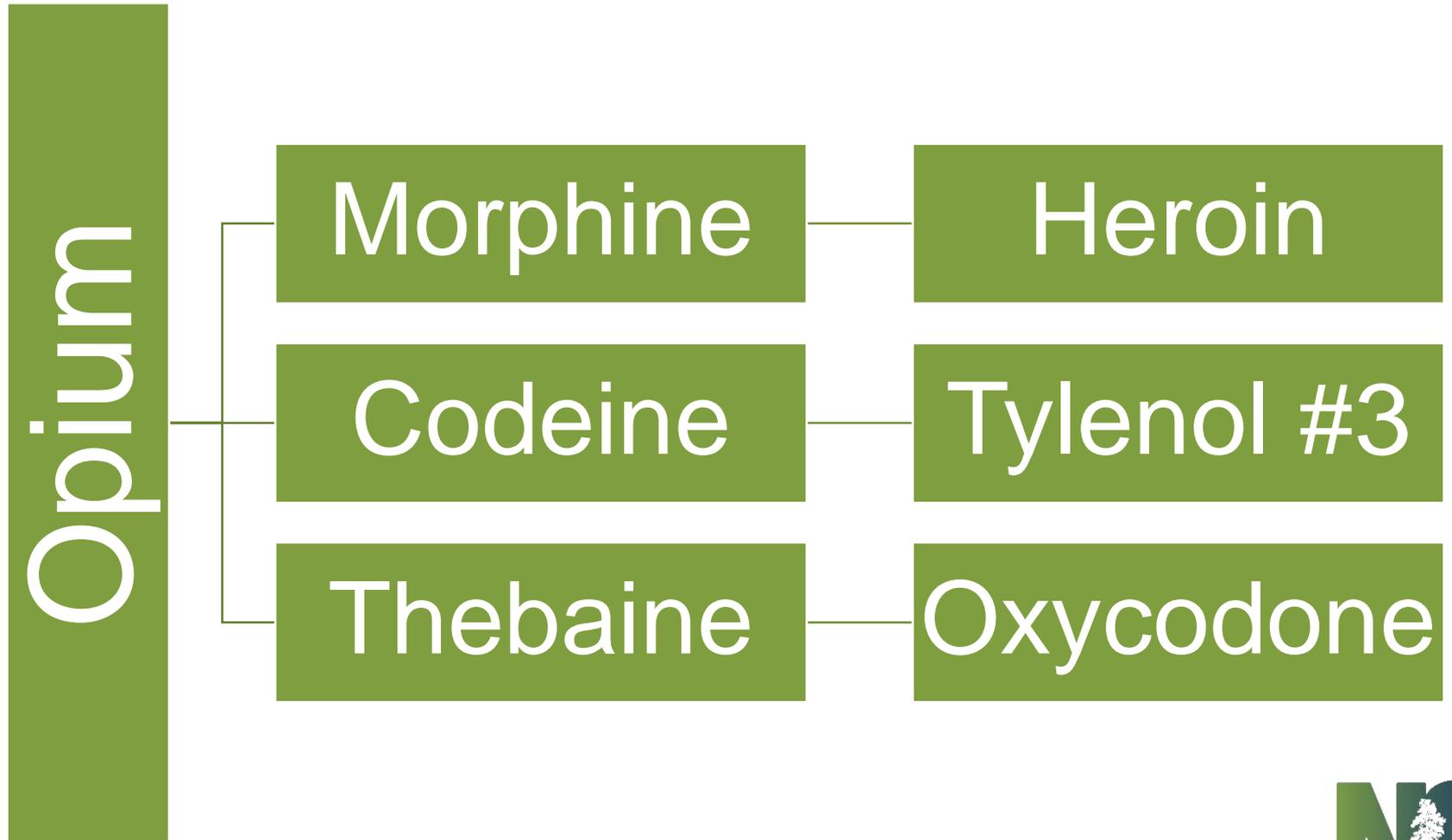
What are Opioids?

- A class of drugs derived from the opium plant.
- This class includes the following drugs:
 - prescription pain relievers like oxycodone, hydrocodone, codeine, morphine, fentanyl and others
 - and illicit heroin and fentanyl

<https://www.asam.org/docs/default-source/advocacy/opioid-addiction-disease-facts-figures.pdf>
Girard, Carol MA, (2017) *The Opioid Epidemic and Its Impact on Older Adults*, [Power Point Slides] Retrieved from umassmed.typepad.com/files/elder-opioid-issues-7.11.pptx



Natural and Synthetic Opioids



Why are Opioids Addictive?

- The substance interacts with opioid receptors on nerve cells in the brain and nervous system to produce pleasurable effects and relieve pain.
- 20% of persons that are prescribed opioids will become addicted to them.

<https://www.asam.org/docs/default-source/advocacy/opioid-addiction-disease-facts-figures.pdf>

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Opioid Related Deaths in the US

- Drug overdose is now the leading cause of accidental death in the US
- 52,404 lethal drug overdoses in 2015

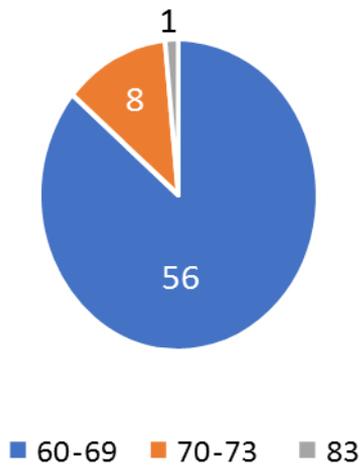
<https://www.asam.org/docs/default-source/advocacy/opioid-addiction-disease-facts-figures.pdf>

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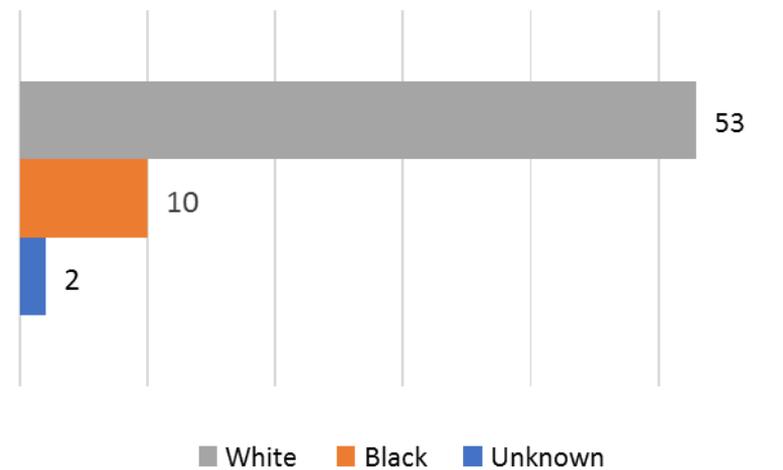


Characteristics of opioid related deaths of adults 60 and over

Number of deaths by age group



Number of deaths by race



Number of deaths by gender

Male:30

Female: 35

Reference:

Data provided by NC Office of Chief Medical Examiner

*Swarna Reddy, July 2017

DHHS' Plan to Address NC's Opioid Epidemic

- NC's current plan spans 5 years
 - 2017-2021
- Major goal is to Reduce opioid overdose deaths by 20% by 2021
- Here's the URL to the plan on NC DHHS' website:
 - <https://www.ncdhhs.gov/opioids>

<https://www.ncdhhs.gov/opioids>



Strategies of NC's Opioid Action Plan

- Coordinating the state's infrastructure to tackle the opioid crisis
- Reducing the oversupply of prescription opioids
- Reducing the diversion of prescription drugs and the flow of illicit drugs
- Increasing community awareness and prevention
- Making naloxone widely available
- Expanding treatment and recovery systems of care
- Measuring the effectiveness of these strategies based on results

<https://www.ncdhhs.gov/opioids>



Metrics for NC's Opioid Action Plan to Determine Effectiveness

- Reduce oversupply of prescription opioids
- Reduce Diversion/Flow of Illicit Drugs
- Increase Access to Naloxone
- Treatment and Recovery

<https://www.ncdhhs.gov/opioids>



Strengthen Opioid Misuse Prevention (STOP) Act

- (House Bill 243/Senate Bill 175)
- Signed into law in NC in 2017 by Governor Roy Cooper
- Intended to reduce the supply of unused, misused and diverted opioids circulating in NC
- Reduce “doctor shopping” and
- Improve care by requiring prescribers to use tools and resources that help prevent inappropriate prescribing

<https://www.ncmedboard.org/resources-information/professional-resources/publications/forum-newsletter/notice/new-summary-of-ncs-new-opioids-law-the-stop-act>



STOP ACT Basic Provisions

- Limits doctors to prescribing no more than a five-day supply of opioids such as Percocet during an initial visit to treat a patient's pain issue, such as a broken bone.
- Doctors can prescribe a bigger supply during follow-up visits, and the limit doesn't apply to cancer patients and others being treated for chronic pain.

<https://www.ncmedboard.org/resources-information/professional-resources/publications/forum-newsletter/notice/new-summary-of-ncs-new-opioids-law-the-stop-act>



Next Steps

- Start talking about the opioid epidemic in your respective communities
- Realize that people may not know that they are misusing medication that was prescribed by a doctor
- Encourage people to lock up their medications as a deterrent to medication diversion by persons seeking medication
- Talk about Naloxone, encourage your respective communities to make it easily available
- Support Evidenced Based Programs funded by Title IIID of the Older Americans Act
- Work with Senior Centers to provide information about opioids and the current epidemic



Evidence Based Programs that Meet IID Requirements and Address Chronic Pain

- Chronic Pain Management
- Tai Chi
- Exercise Classes
- Home Meds

Information provided by Audrey Edmisten, DAAS, January 2018



Senior Center Activities to Address Older Adults, Chronic Pain and the Opioid Epidemic

- Offer the Evidence Based Trainings listed on previous slide (funded by Title III-D of Older Americans Act)
- Have a speaker present on chronic pain, opioids, the importance of securing medications to avoid unintentional use by friends, family members, and taking medication as prescribed by doctor, etc.
- Have a Medication Review Day (Brown Bag/Red Bag)
- Educate participants about locations to safely dispose of un-needed or expired medication

Information provided by Leslee Breen, DAAS, January 2018



References

Girard, Carol MA, (2017) *The Opioid Epidemic and Its Impact on Older Adults*, [Power Point Slides] Retrieved from umassmed.typepad.com/files/elder-opioid-issues-7.11.pptx

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<https://www.ncmedboard.org/resources-information/professional-resources/publications/forum-newsletter/notice/new-summary-of-ncs-new-opioids-law-the-stop-act>

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Galicia-Castillo, Marissa. (2016). Opioids for Persistent Pain in Older Adults. *Cleveland Clinic Journal of Medicine*, 83 (6), 443-451.

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Edmisten, A. North Carolina Department of Health and Human Services, Division of Aging and Adult Services (January 2018)

Breen, L. North Carolina Department of Health and Human Services, Division of Aging and Adult Services (January 2018)

