CESAR FAX

July 16, 2012
Vol. 21, Issue 28

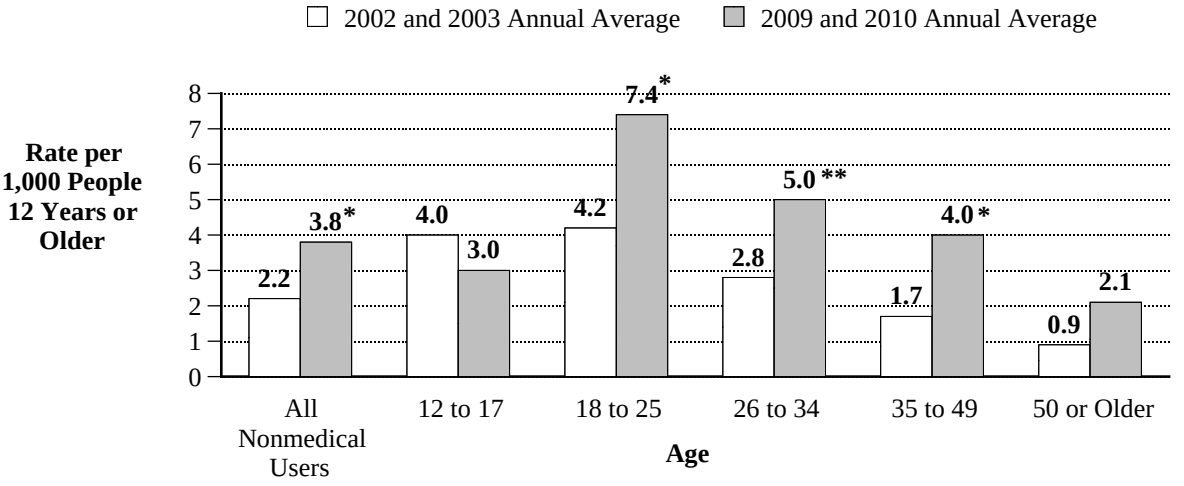
A Weekly FAX from the Center for Substance Abuse Research

University of Maryland, College Park

Chronic Nonmedical Use of Prescription Opioid Pain Relievers Nearly Doubles Since 2002

While overall nonmedical use of prescription pain relievers did not increase from 2002-2003 to 2009-2010, chronic nonmedical use—use on 200 or more days in the past year—increased significantly, from a rate of 2.2 to 3.8 per 1,000 people. According to data from the National Survey on Drug Use and Health (NSDUH), there were statistically significant increases in the chronic nonmedical use of prescription pain relievers among 18 to 25, 26 to 34, and 35 to 49 year olds. Chronic nonmedical use among people 50 years and older more than doubled, but did not reach statistical significance. According to the authors, these findings are important because they parallel "increases in overdose deaths, treatment admissions, and other negative effects associated with opioid pain relievers in recent years" (p. E1). Since 2006, opioid analgesics have been involved in more drug poisoning deaths than any other drug (see *CESAR FAX*, Volume 21, Issue 4).

Rate (per 1,000 People 12 Years and Older) of Chronic Past Year Nonmedical Use of Prescription Drugs



*Difference between the 2002-2003 and 2009-2010 annual average rate is statistically significant at the P < .01 level.
**Difference between the 2002-2003 and 2009-2010 annual average rate is statistically significant at the P < .05 level.

NOTES: Data are from the National Survey on Drug Use and Health (NSDUH), an annual survey of the noninstitutionalized, civilian population 12 years and older. Chronic past year nonmedical use of prescription pain relievers is defined as use of prescription pain relievers on 200 or more days in the prior 12 months without a prescription or use simply for the experience or feeling it causes. Prescription pain relievers include prescription opioid pain relievers and selected barbiturate combination products.

SOURCE: Adapted by CESAR from Jones, C.M., "Frequency of Prescription Pain Reliever Nonmedical Use: 2002-2003 and 2009-2010", *Archives of Internal Medicine*, published online 6/25/2012. For more information, contact Dr. Jones at fjr0@cdc.gov.

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