Thought to be an issue only in major U.S. cities or more populated states, use of opioids (which includes heroin and prescription pain relievers) is becoming a problem of epidemic proportions in more rural areas of the country. While alcohol, marijuana and methamphetamines remain the primary substances misused in Iowa, in the last decade significant increases have been observed in the number of Iowans identifying opioids as their drug of choice at the time of admission to treatment – and in the number of overdose deaths.

Data collected by the Bureau of Substance Abuse show that treatment admissions related to opioid use have more than tripled since 2005, and data from the Bureau of Health Statistics show that opioid overdose and related deaths have more than doubled during the same time period (overdose meaning an opioid was identified as the primary cause of death in the medical examiner's report; related meaning an opioid was referenced in the medical examiner's report and could have contributed to the cause of death).

<table>
<thead>
<tr>
<th>Opioid Treatment Admissions:</th>
<th>Opioid Overdose Deaths:</th>
<th>Opioid Related Deaths:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of admissions in 2005</strong></td>
<td><strong>Number of admissions in 2016</strong></td>
<td><strong>Number of overdose deaths in 2005</strong></td>
</tr>
<tr>
<td>608</td>
<td>2,274</td>
<td>28</td>
</tr>
</tbody>
</table>

*Indicates provisional data

**Why the increase?**
According to the Centers for Disease Control and Prevention (CDC), in 2012, health care providers wrote 259 million prescriptions for opioid pain relievers – enough for every American adult to have a bottle of pills. Prescription opioid sales in the United States have increased by 300% since 1999, even though there has not been an overall change in the amount of pain Americans report. In a study by the International Narcotics Control Board, the United States accounts for nearly 100% of the Hydrocodone used globally and 81% of Oxycodone used.

As people use opioids continuously their tolerance increases, but they may not be able to maintain their original source for the medication. This can lead them to turn to other sources and even switch from prescription drugs to cheaper and riskier substitutes like heroin. While no cause and effect relationship has been proven, prescription use and its possible connection in developing a substance use disorder and overdose warrants continued monitoring.

**How is opioid dependency treated?**
Several options are available for effectively treating prescription and other opioid dependence. These options include a combination of counseling approaches and medications such as Naltrexone, Methadone, and Buprenorphine.

**What treatment options are supported in Iowa?**
For the past 20 years, the Iowa Department of Public Health (IDPH) has funded selected opioid treatment programs to provide medication assisted treatment to Iowans in the form of methadone maintenance. As approaches to medication assisted treatment continued to evolve, through its Access to Recovery (ATR) grant, IDPH began funding additional medications such as Naltrexone and Buprenorphine. In 2015, SAMHSA awarded IDPH a Medication Assisted Treatment – Prescription Drug and Opioid Addiction (MAT-PDOA) grant to further support Iowa's efforts in addressing opioid misuse.

**What is being done to prevent opioid overdose deaths?**
In 2016, Governor Branstad signed Senate File 2218 and House File 2460 into law, which increased availability of Naloxone for persons in a position to assist. Following this, State Epidemiologist Dr. Patricia Quinlisk issued a statewide “standing order” allowing a person in a position to assist in the event of an opioid overdose, to go into any participating pharmacy and purchase Naloxone without first having to see a physician.

For more information about treatment for an opioid use disorder in Iowa, please visit the IDPH Medication Assisted Treatment webpage at [http://idph.iowa.gov/mat](http://idph.iowa.gov/mat).