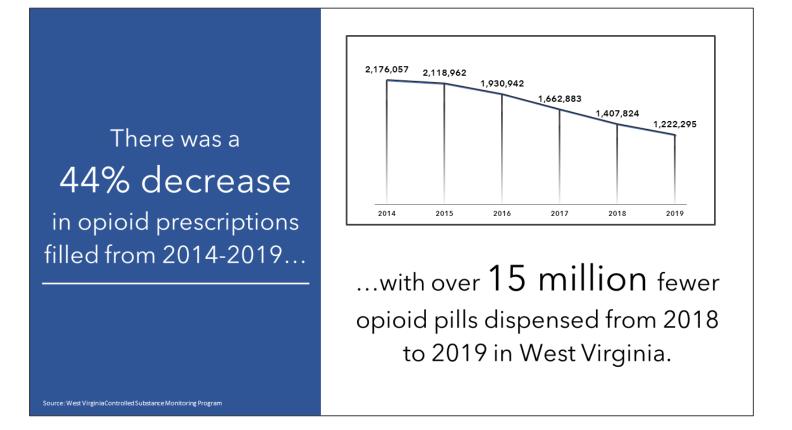
West Virginia Board of Pharmacy Prescription Opioid Indicators Report Putnam County – 2019



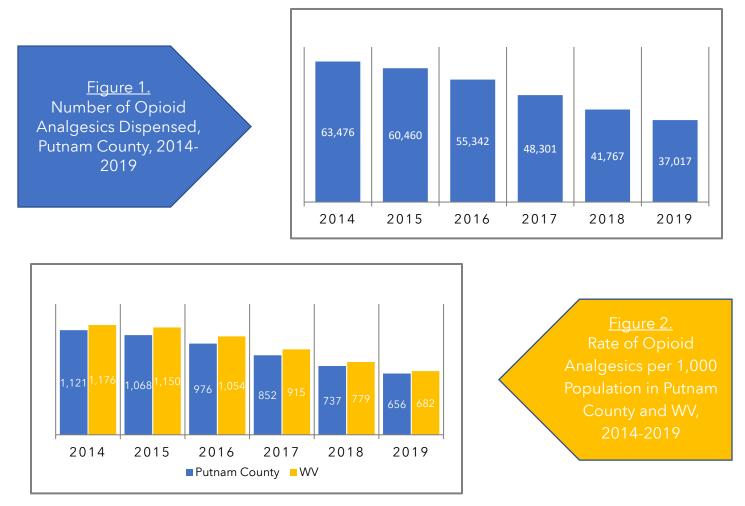
The West Virginia Violence and Injury Prevention Program (WV VIPP), in collaboration with the West Virginia Board of Pharmacy and the West Virginia University Injury Control Research Center (ICRC), under the direction of the Centers for Disease Control and Prevention (CDC), continue to work to address prescription drug misuse, diversion, and overdose within the state of West Virginia. Prescription drug overdose continues to be a major issue in West Virginia. Preliminary data from the West Virginia Heath Statistics Center shows that in 2018, over 900 people died in association with drug misuse (including prescription and illicit drugs) with a rate of 52.2 per 100,000 population. This is nearly three times the national average. To help combat this epidemic, CDC provided specific indicators to identify high-risk areas within the state to allow for intervention and community education.



1

Indicator 1: Number and rate of opioid analgesics per 1,000 state residents

This indicator includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V. The figures below show the total number of opioid prescriptions for Putnam County and the rate per 1,000 population compared to the state. Census data was used to obtain demographic information and population sized.



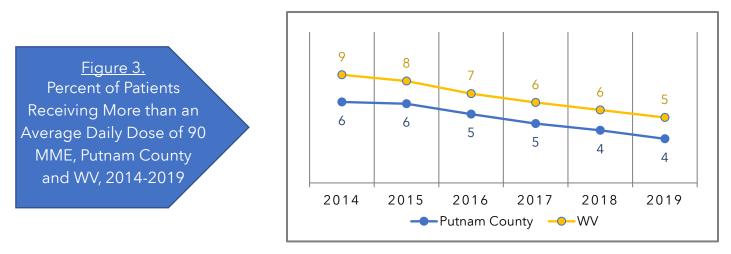
Source: West Virginia Controlled Substance Monitoring Program

What Does This Mean?

This indicator is important because it provides information about prescription opioid use for each county. These data will help determine areas where high prescribing/dispensing are occurring around the state and allow for education on responsible opioid prescribing. High rates of opioid dispensing mean large quantities of opioids that are out in the community. Putnam County had lower rates of opioids being prescribed compared to the state from 2014-2019 and there was an overall decrease during this time.

Indicator 2: Percent of patients receiving more than an average daily dose of 90 morphine milligram equivalents (MME).

This indicator shows the total average daily dose of MMEs that a patient is taking. It includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V. MMEs are used as a measure to describe the potency of an opioid. Calculating MMEs is important to determine which patients may be at risk for an overdose. The figure below shows the percent of patients with greater than an average daily dose of 90 MMEs in Putnam County compared to the state during 2014-2019.



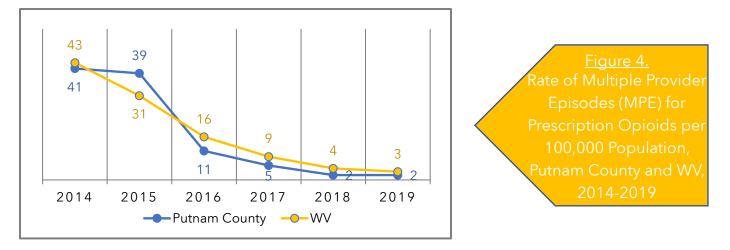
Source: West Virginia Controlled Substance Monitoring Program

What Does This Mean?

This indicator is important because it provides information for prescribers about how much morphine equivalent drug the patient is receiving. MMEs help determine the amount of morphine an opioid dose is equal to when prescribed, often used as a gauge of the abuse and overdose potential of the amount of opioid that is being given at a particular time. It is also a useful tool to identify high-burden areas in the state, which is important for public health surveillance at the county level. From 2014-2019, Putnam County's percent of patients receiving more than an average daily dose of 90 MMEs was lower than the state and the percentage decreased during this time.

Indicator 3: Rate of multiple provider episodes for prescription opioids (5 or more prescribers and 5 or more pharmacies in a 6-month period) per 100,00 residents.

This indicator shows the rate of patients who went to 5 or more prescribers and 5 or more pharmacies within a 6-month period, or multiple provider episode (MPE). The rate is calculated per 100,000 population. It includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V.



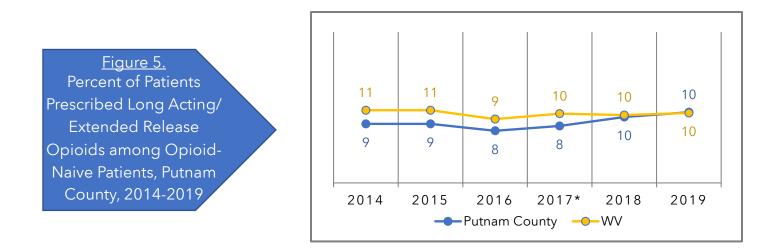
Source: West Virginia Controlled Substance Monitoring Program

What Does This Mean?

This indicator is important because provides valuable information on prescription filling behaviors. Patients who receive prescriptions from more than five doctors and who fill at more than five pharmacies are at greater risk of drug overdose. This indicator helps determine patients who may have drug seeking habits (i.e., "doctor shopping"). From 2014-2019, Putnam County had lower rates of patients who qualified as having an MPE compared to the state apart from 2015. There was an overall decrease in the rate during this time.

Indicator 4: Percent of patients prescribed long-acting/extended release opioids among opioid-naïve patients

This indicator represents the percent of patients with no prescribed opioid prescriptions in the previous 45 days* who were prescribed at least one long acting/extended release (LA/ER) opioid, among all patients with LA/ER opioid prescriptions. It includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V.



Source: West Virginia Controlled Substance Monitoring Program

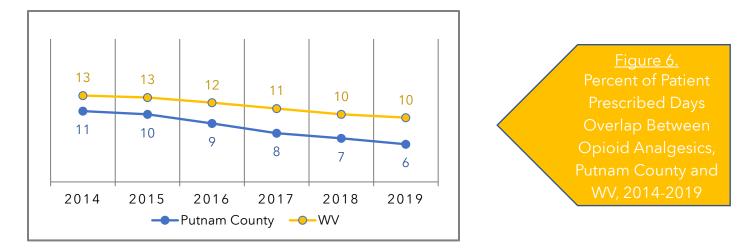
What Does This Mean?

This indicator is important to understand because it provides information about individuals who are not accustomed to opioid medications, which may potentially increase the risk of opioid dependence, misuse, or overdose. CDC opioid prescribing guidelines recommend using immediate release (IR) opioids before taking LA/ER. From 2014-2019, Putnam County had a lower percentage of patients who were opioid-naïve compared to the state. However, the percentage increased slightly during this time.

*Note that CDC changed the definition of "opioid-naïve" from 60 days to 45 days in 2017.

Indicator 5: Percent of patient prescription days with overlapping opioid prescriptions

This indicator shows the percent of days in which more than one prescribed opioid prescription during the same time-period were dispensed, among all prescription days. It includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V.



Source: West Virginia Controlled Substance Monitoring Program

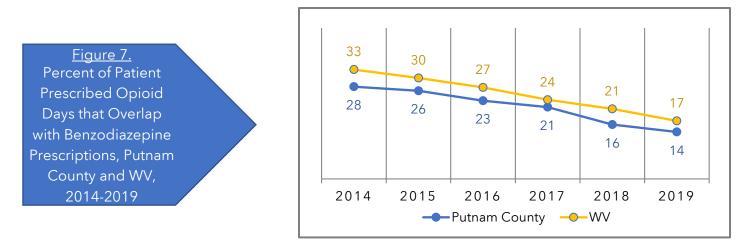
What Does This Mean?

This indicator represents the patients who may potentially be using their opioid prescriptions not as prescribed or may show areas where drug diversion is occurring. Using multiple opioid prescriptions during the same time-period increased the risk for drug dependency and overdose. It is important to understand this because a considerable number of drug overdose deaths include more than one opioid. From 2014-2019, Putnam County had a lower percentage of prescription overlap compared to the state average and there was an overall decrease during this time.

6

Indicator 6: Percent of patient prescriptions days with overlapping opioid and benzodiazepine prescriptions.

This indicator represents the percent of patients who have an opioid and a benzodiazepine (i.e., Lorazepam, Diazepam) prescription on the same day among all opioid prescription days. It includes all opioid prescriptions that are classified as either Schedule II, III, IV, or V.



Source: West Virginia Controlled Substance Monitoring Program

What Does This Mean?

This indicator is important because it shows areas in the state where patients are using both opioids and benzodiazepine drugs at the same time. Taking an opioid with a benzodiazepine increases the risk for drug overdose and death, as both classes of medication depress the central nervous system. From 2014-2019, Putnam County had a lower percent of days where there was an overlapping opioid and benzodiazepine prescription than the state average. There was an overall decrease over this time period.

Patient County Indicator 1 Indicator 2 Indicator 3 Indicator 4 Indicator 5 Indicator 7 BARBOUR 34 26 38.5 42 24 32 BERKELEY 37 2 19 40.5 2 48 BOONE 2 48 2 36.5 51 3 BRAXTON 43 24 38.5 40.5 18 26
BARBOUR342638.5422432BERKELEY3721940.5248BOONE248236.5513BRAXTON432438.540.51826
BOONE 2 48 2 36.5 51 3 BRAXTON 43 24 38.5 40.5 18 26
BRAXTON 43 24 38.5 40.5 18 26
BROOKE 25 17 38.5 17 11 14.5
CABELL 10 44 16 9 36 18.5
CALHOUN 46 38 38.5 22 52.5 47
CLAY 5 32 38.5 25 37 53
DODDRIDGE 54 10 38.5 27 10 46
FAYETTE 15 37 38.5 14.5 42 41
GILMER 50 20 38.5 31 30.5 6
GRANT 39 51 38.5 11 14.5 7
GREENBRIER 13 15 15 28.5 29 26
HAMPSHIRE 41 3 38.5 28.5 4 44.5
HANCOCK 11 14 38.5 47 8 12
HARDY 49 31 6 43 7 33.5
HARRISON 14 13 20 51.5 20 5
JACKSON 45 53 38.5 31 38 39.5
JEFFERSON 44 4 13 31 3 51.5
KANAWHA 18 50 14 24 43.5 37
LEWIS 12 21 38.5 49 14.5 29.5
LINCOLN 4 34 8 53 34 4
LOGAN 1 43 4 45 49 2
MARION 31 36 12 7 30.5 16
MARSHALL 22 9 38.5 5 32.5 13
MASON 29 45 11 10 50 35
MCDOWELL 7 16 38.5 18 26 18.5
MERCER 23 19 18 23 24 23.5
MINERAL 40 18 38.5 34 5.5 14.5
MINGO 20 47 38.5 6 55 1
MONONGALIA 55 12 21 19 16 38
MONROE 51 6 38.5 20.5 13 11
MORGAN 26 1 38.5 44 1 49
NICHOLAS 8 35 10 54.5 24 26
OHIO 35 7 38.5 3 17 21.5
PENDLETON 36 5 38.5 54.5 5.5 21.5
PLEASANTS 33 41 38.5 36.5 39 51.5
POCAHONTAS 42 11 38.5 16 19 39.5
PRESTON 38 8 38.5 50 12 18.5
PUTNAM 28 46 17 26 41 18.5
RALEIGH 30 30 38.5 12 45 28
RANDOLPH 24 23 38.5 35 27 42
RITCHIE 16 49 3 8 47.5 36
ROANE 17 52 5 4 32.5 33.5
SUMMERS 9 25 38.5 48 22 23.5
TAYLOR 27 27 38.5 46 43.5 10
TUCKER 47 33 38.5 14.5 28 50
TYLER 48 42 38.5 1 46 29.5
UPSHUR 53 29 38.5 33 21 54
WAYNE 52 39 38.5 38 35 8
WEBSTER 3 22 1 51.5 9 43
WETZEL 19 54 38.5 2 52.5 9
WIRT 21 55 38.5 39 54 55
WOOD 32 40 9 13 40 44.5
WYOMING 6 28 7 20.5 47.5 31

*Each county is ranked from 1 to 55, where a rank of 1 is assigned to the county with the highest (worst) rate or percentage and a 55 to the county with the lowest (best) rate or percentage. Counties with a ".5" in the rank had the same rank as another county and the average rank was returned.

8

Percent of Putnam County with a controlled substance prescription

28%

Percent of Putnam County with an opioid prescription

18%

Percent of Putnam County with a benzodiazepine prescription

Source: West Virginia Controlled Substance Monitoring Program

For more information regarding this county profile or the West Virginia Controlled Substance Monitoring Program (CSMP), please see contact information below.

Contact Information:

Mike Goff, Board of Pharmacy Executive Director Phone: (304) 558-8411 E-mail: <u>Michael.L.Goff@wv.gov</u>

Nathan Wood, CSMP Epidemiologist Phone: (304) 414-0789 E-mail: <u>Nathan.G.Wood@wv.gov</u> Tim Dotson, CSMP Epidemiologist Phone: (304) 414-0537 E-mail: <u>Timothy.S.Dotson@wv.gov</u>



To access other WV County Profile Reports, follow the link below:

https://dhhr.wv.gov/vip/county-reports/Pages/default.aspx

