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Opioid epidemic in state skyrockets

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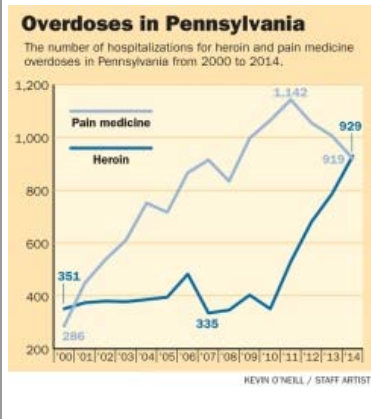


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Since 2000, hospitalizations for pain medication and heroin abuse skyrocketed statewide and in Northeast Pennsylvania, according to a study released by a state agency that monitors health care costs.

The news comes as no shock to those fighting in the trenches in the battle against the opioid — heroin and pain pills — epidemic.

“It’s bad and getting worse,” said Margaret Jarvis, M.D., medical director of the Geisinger Health System’s Marworth Treatment Center in Waverly. “The only thing that I find surprising about the data is that some of the areas aren’t seeing as huge an increase as the others are.”

From 2000-2014, hospitalizations for pain medication overdoses increased 225 percent statewide, while those for heroin overdoses jumped 162 percent, according to the report from the Pennsylvania Health Care Cost Containment Council.

In the nine counties of Northeast Pennsylvania — Lackawanna, Luzerne, Monroe, Pike, Wayne, Wyoming, Susquehanna, Bradford and Sullivan — hospitalizations for pain medication overdoses rose by 184 percent in the same timeframe. Hospitalizations for heroin overdoses increased only 34 percent, the lowest regional bump in the state, which saw hikes across the board. The Philadelphia region also saw a relatively low increase of hospitalizations for heroin overdoses: 36 percent.

Those numbers stand in stark contrast to the rural regions of Northwest and Northcentral Pennsylvania, which saw increases in heroin overdose hospitalizations exceeding 400 and 500 percent, respectively, in that timeframe. Experts had only guesses for the discrepancy. Some said it could

simply be a statistical anomaly.

Kevin McLaughlin, executive director of the Drug and Alcohol Treatment Service of Scranton, recalled how heroin had crept into pockets of the urban areas of Northeast Pennsylvania long ago, compared to more rural areas where the drug may have been historically absent before its more recent explosion.

The difference could also be explained by the fact that the report on hospitalizations does not include overdose victims who are revived in an emergency room or outside of a hospital, and then walk away, said Gary Snipes, the director of clinical services at CHOICES, Commonwealth Health’s chemical dependency treatment program.

The wider use of a drug called Naloxone, often applied as a nasal spray by paramedics, police officers and even relatives, can reverse the effects of an opioid drug, including heroin and pain pills, in someone who has overdosed.

Its effectiveness may also be making addicts more cavalier with the drug using habits, Mr. Snipes said.

Nationally, the numbers of deaths follow those of hospitalizations in Pennsylvania. From 2000-2014, the national death rate of overdoses involving opioids increased 200 percent, according to a report released last month by the Centers for Disease Control and Prevention.

Desperately needed in the fight against opioid abuse, Dr. Jarvis said, is a statewide database that tracks prescriptions. Many states already have it — a simple computer program network that would allow prescribing physicians and pharmacists to see all the prescriptions a person had received and could cut down on addicts abusing the system. The launch of such a database is held up in the state legislature.

“We needed it a year ago,” Dr. Jarvis said.

Physicians also need more education in prescribing legal opioids, experts say, to reduce the common route many patients take from pain pills treating a legitimate injury to abundant, cheap and potent street heroin to feed an addiction.

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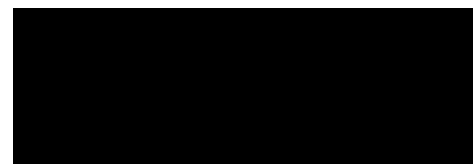
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Because of the speed and intensity of which the opioid epidemic has spread, the battle tactics against it are constantly in flux. There is no plan to follow, experts say.

"We think we're doing some good stuff," Dr. Jarvis said. "We don't have data to support it all. But we're flying ahead hoping and crossing our fingers and praying because so many people are dying."

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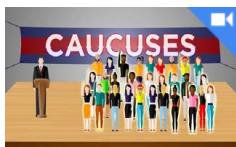
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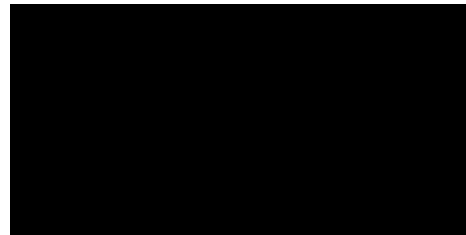
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