Fall 11-10-2017

The Cost of Opioid Epidemic in West Virginia

Rachel Merino
Nicholas Bowden
Sruthi Katamneni

Alberto Coustasse Dr.PH. MD,MBA
coustassehen@marshall.edu

Follow this and additional works at: http://mds.marshall.edu/mgmt_faculty

Part of the Business Administration, Management, and Operations Commons

Recommended Citation

This Presentation is brought to you for free and open access by the Management, Marketing and MIS at Marshall Digital Scholar. It has been accepted for inclusion in Management Faculty Research by an authorized administrator of Marshall Digital Scholar. For more information, please contact zhangj@marshall.edu, martj@marshall.edu.
THE COST OF OPIOID EPIDEMIC IN WEST VIRGINIA

Rachel Merino, M.S; Nicholas Bowden, M.S; Sruthi Katamneni, B.D.S, M.S
Alberto Coustasse, Dr.PH. MD,MBA, MPH
MANAGEMENT AND HEALTHCARE-
LEWIS COLLEGE OF BUSINESS

ABSTRACT
The purpose of this research was to examine and analyze the cause of the opioid epidemic and subsequent responses to it in the state of West Virginia.

Methods: The methodology for this paper mainly followed a literature review of 37 articles from 2009-2017 followed by a semi-structured interview with a licensed physician in the state of West Virginia.

Results: The U.S. is facing a nationwide epidemic, with the epicenter being West Virginia with the highest rates of overdoses accounting for 41.5 deaths for 100,000 people among the 33,091 deaths in 2015. The number of people injecting drugs has increased from 36% in 2005 to 54% in 2015. A grant of $5.8 million was awarded to West Virginia for the State Opioid Response for providing more than 4,000 of the two-dose kits that were dispersed to high-priority areas. The total U.S cost of prescription opioid abuse in 2011 has been estimated at $25 billion, and criminal-justice-system costs to $5.1 billion. But the largest cost has been related to the workplace, which has accounted for $25.6 billion, in the form of lost earnings and employment. The reasons for this opioid epidemic incidence in WV have been a combination of sociocultural factors, including a depressed economy, low employment, lack of education, and a high rate of prescribing and dispensing of prescription opioids. These strategies were evaluated through a systematic literature review and semi-structured interview that displayed a broad array of tactics used in West Virginia that have struggled to keep up with the rate of related opioid overdoses.

Conclusion: The current efforts implemented to address the opioid epidemic have led to increased education and awareness about overdose reversal and safe prescribing practices. While the overdose rate continues to climb, the number of strategies employed is increasing. Over the next few years West Virginia will spend time initiating new strategies and expanding upon old ones with the addition of federal funding.

OBJECTIVE
The purpose of this research was to examine and analyze the cause of the opioid epidemic and subsequent responses to it in the state of West Virginia.

HYPOTHESIS
The primary hypothesis of this study was that if physicians continue to over prescribe opioids for chronic pain then more individuals are at risk for developing opioid dependence; therefore, increasing the likelihood of substance use disorders and potential overdoses.

The secondary hypothesis of this study was that if physicians abruptly stop prescribing opioids then patients are at risk for entering withdrawal; therefore, increasing the likelihood of obtaining opioids through illegal prescriptions or using illicit opiates such as heroin.

BACKGROUND
• Historically opioid medications, used for the treatment of chronic pain, were viewed as non-addictive substances
• Staggering 33,091 deaths per the total 2015 U.S. population occurred due to opioid overdose
• In the U.S., approximately 240 million opioid prescriptions were dispensed in the year 2015 which accounted for one for every adult in the general population.

RESULTS
Figure 1: CDC’s Checklist for Prescribing Opioids in Primary Care

Financial Impact of Opioid Epidemic in West Virginia
• West Virginia has been at the epicenter of this epidemic with the highest rates of overdose, 41.5 deaths per 100,000 people
• The reasons for this opioid epidemic incidence in WV have been a combination of sociocultural factors, including a depressed economy, low employment, lack of education, and a high rate of prescribing and dispensing of prescription opioids.
• One underlying factor that has escalated West Virginia’s opioid epidemic has been the disproportionate number of jobs requiring manual labor, like the coal mining industry jobs. These dangerous occupations commonly held by West Virginians has led to more frequent opioid prescriptions to treat the injuries associated to these labor-intensive jobs.

DISCUSSION
• There has been significant impact on the society with the drug abuse with respect to clinical and economic burden.
• The three main contributing factors to the opioid epidemic have been 1) the mental health status of the state’s population, 2) labor intensive occupations, and 3) the financial incentive that accompanies the distribution of prescription opioids and illicit opiates, both legally and illegally.
• Lack of robust research and resources hampered many of the existing programs and prevented their scale-up. Law enforcement and political actors also have opposed the initiatives for the fear of enabling or sanctioning illegal drug use, while witnesses of overdoses involving illegally-obtained drugs avoided summoning emergency response.

CONCLUSION AND RECOMMENDATIONS:
The current efforts implemented to address the opioid epidemic have led to increased education and awareness about overdose reversal and safe prescribing practices. While the overdose rate continues to climb, the number of strategies employed is increasing. Over the next few years West Virginia will spend time initiating new strategies and expanding upon old ones with the addition of federal funding.

Thank-You