Geographic Variation in Opioid Mortality by Race/Ethnicity, 1999–2016

Identifying epidemic hotspots

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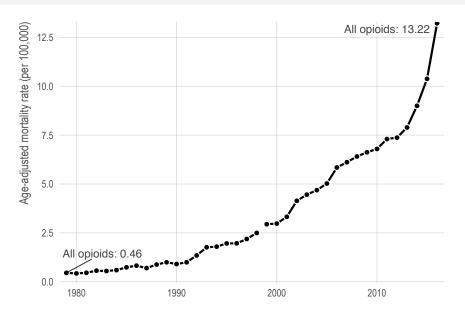
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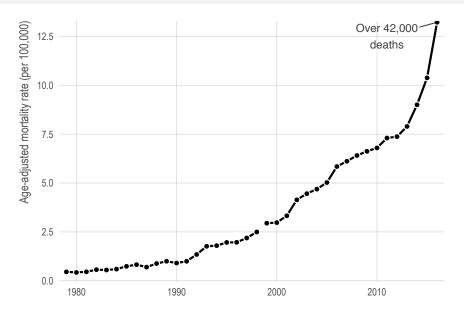
³Heinz College Carnegie Mellon University

PAA 2018: Denver, CO

Almost 30x increase since 1980

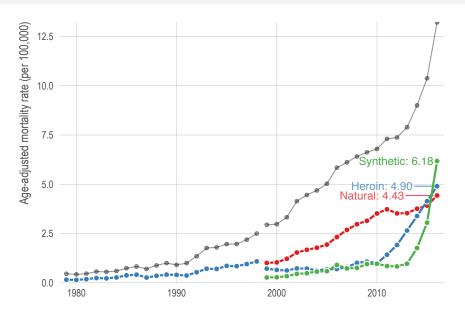


More than deaths by car accidents or guns

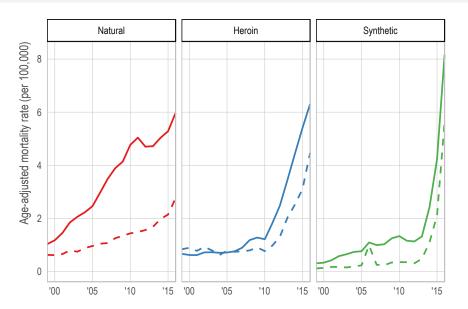


Variation in the opioid epidemic

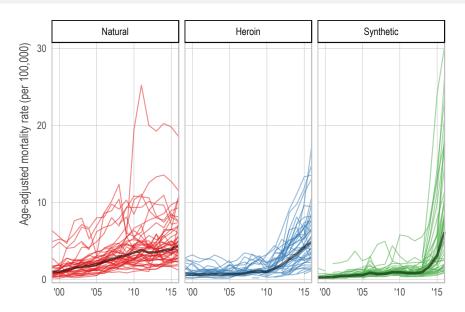
Variation by opioid type



Variation by race/ethnicity



Variation by state



Aims of the paper

- Systematically describe the opioid epidemic across geography (state), race/ethnicity, and opioid type.
 - The epidemic over time (1999–2016)
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 - The epidemic over time (1999-2016)
 - The *current* epidemic in terms of both mortality rate and rate of increase
- Identify "epidemic hotspots" areas with high mortality and rapid increases

Data / Methods

• Multiple cause of death data from NCHS

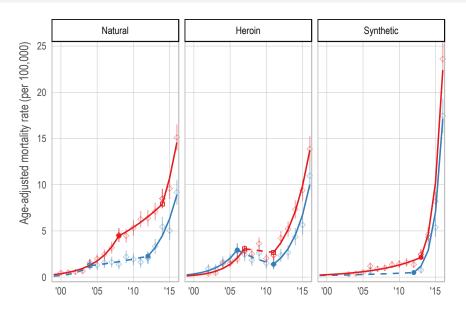
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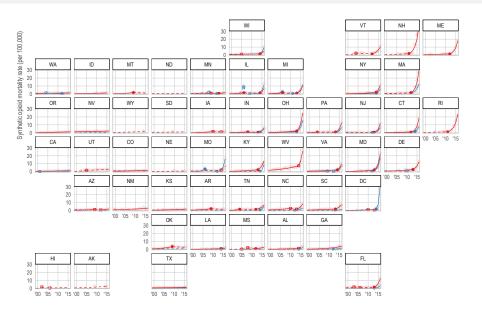
Data / Methods

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- Joinpoint regression

Example Results: Maryland

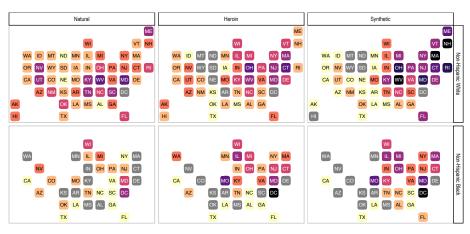


Example Results: Synthetic Opioids



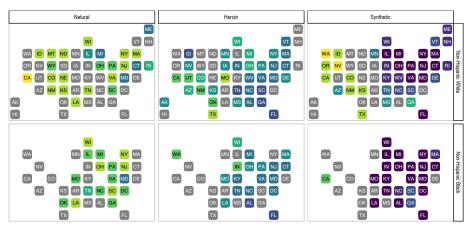
Results: Current Epidemic

Current Mortality



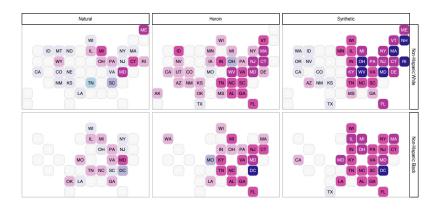
Mortality (per 100,000) [0.2.5] (2.5.5] (5.7.5] (7.5.10] (10.15] (15.20] (20.25] (25.34] NA

Current Trajectory



APC (%) /0 E1 /5 401 /10 151 /15 201 /20 301 /30 501 /50 751 /75 1001 /100 3311 NA

Epidemic Hotspots





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- Strong geographical clustering of epidemic hotspots

Conclusions

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 - Supervised consumption sites
- Surveillance of illicit markets needs to be dramatically improved
 - Better measurement of potency of drugs
 - Types of drugs
 - Cost and availability

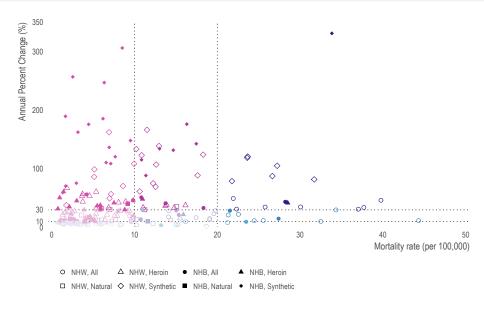
Thank you

Code and interactive results explorer:

https://tiny.cc/paa2018

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Epidemic Hotspots



Average Annual Percent Change

