Health Brief: Addiction in Tennessee



Nearly 400,000 Tennesseans abuse or are dependent on alcohol or drugs. How it's happening and what we do to change it.

Nearly 400,000 Tennesseans abuse or are dependent on alcohol or drugs.

The U.S. consumes 80% of the world's opioids but makes up less than 5% of the world's population.

There has been a 220% increase in drug overdose deaths in Tennessee since 1999.

Only 1 of every 10 Tennesseans who needs substance abuse treatment receives it.

What is addiction?

Addiction is a chronic brain disease like mental illness. It is widely accepted that addiction is a compulsion, not a choice.

In recent years, many in the scientific community have started referring to addiction as substance use disorder (SUD).

People suffering from substance use disorders will seek out the substance of the addiction

above all else and despite negative consequences. People who are truly addicted would rather satisfy their craving than eat food or pay bills.

More than **1,000**

infants in Tennessee are born dependent on drugs each year

Addiction is a medical condition, but it is treatable.

How does addiction work?

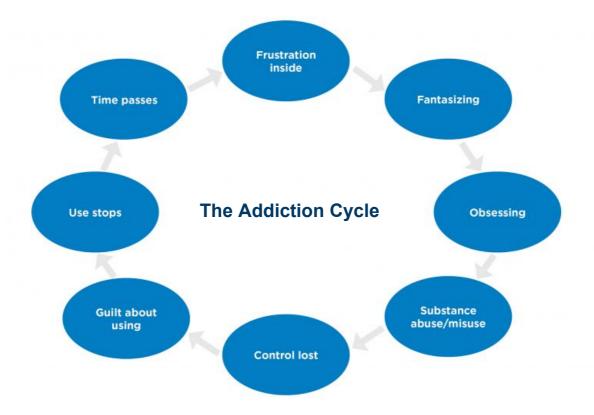
Over time, substance abuse leads to changes in the brain.

Most drugs work by flooding the brain's reward system with dopamine, a neurotransmitter that regulates movement, thinking, motivation, emotion and pleasure.

Drugs can release 2-10 times the amount of dopamine that natural rewards do, creating euphoric effects.

How does addiction affect a person over time?

- The brain adjusts to overwhelming surges of dopamine, producing less or reducing the number of receptors that can receive positive signals.
- This leaves the reward circuit abnormally low, weakening a person's ability to experience pleasure.
- That, in turn, leads the person to form a higher tolerance, which leads to repeated use of the substance to try to bring dopamine function back to normal levels.
- The development of this tolerance leads to changes in the brain, eroding self-control and creating intense impulses to take drugs.



How do you overcome addiction?

Addiction is cyclical, which means relapse is common. Once an addiction sets in, physical dependence makes quitting without medical help nearly impossible.

While symptoms of alcohol withdrawal typically cease after a week, it can take months for a drug abuser to mentally get past their disorder and up to a year to stop craving the high.

Addiction is a chronic brain disease like mental illness

The brain changes associated with addiction can be treated and reversed through therapy, medication, exercise and other treatments. Effective treatments replace all the things that the drug did for the addicted person and provide them with ways to relieve stress, cope with challenges and create new rewards.

The 5 stages of addiction recovery are:

- Awareness and acknowledgment
 Acknowledging there is a problem and action is needed
- ConsiderationMoving in the direction of recovery, but not yet actively pursuing it
- Exploring recovery
 No longer in denial, taking small steps such as exploring moderation, abstinence and entering treatment
- 4. Early recovery

 Substance abuse has stopped and learning about how to remain drug free has begun

 Active recovery and maintenance Understanding continued work will be needed to maintain sobriety

What causes addiction in Tennessee?

Alcohol

5.4% of Tennesseans aged 12 or older are dependent on or abuse alcohol.

4.8% of people 21 and older report heavy alcohol use.

Heavy alcohol use is defined as five or more days per month of binge drinking, which is heavily consuming alcohol over a short period of time in order to become intoxicated.

Opioids and prescription medication

1 in 6 Tennesseans is estimated to be misusing or abusing opioids or in treatment for opioid abuse.

- 221,000 Tennesseans have used prescription drugs for nonmedical reasons
- 69,100 Tennesseans are addicted to opioids
- 143 opioid prescriptions are written for every 100 Tennesseans

In 2012, prescription opioid drugs surpassed alcohol as the most abused substance in Tennessee.

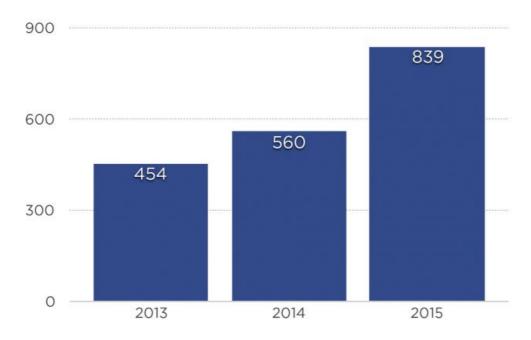
In 2016, 1,631 people died from drug overdoses in Tennessee. It is the highest annual number of overdose deaths recorded in state history.

Heroin

Heroin is an opioid most commonly used as a recreational drug for its euphoric effects. As prescription pain pills become harder to attain, addicts often turn to heroin.

In recent years, the number of patients seeking treatment in state-funded facilities has increased 157% in Tennessee.

Patients seeking treatment for heroin addiction at Tennessee facilities



Fentanyl

Fentanyl is a synthetic opioid that is 50 to 100 times more potent than morphine.

Used for severe pain, pure fentanyl is so strong — vets use it to tranquilize elephants — it can be fatal if simply absorbed through the skin.

Deaths from fentanyl and other synthetic opioids in Tennessee increased from 169 in 2015 to 294 in 2016.

Methamphetamine (meth)

Meth is a stimulant drug that causes irreversible, serious damage to the body.

Methamphetamine use in Tennessee has leveled off in recent years, but there are still 800 meth labs operating at any given time in the state.

What are the risk factors for addiction?

Anyone can be an addict. Factors influencing risk of addiction include biology, age and environment.

Childhood

Many risk factors for substance use disorder start in childhood.

Protective factors that reduce the likelihood of abuse include strong bonds with family, consistently enforced rules and success in school.

Negative risk factors include a chaotic home environment, aggressive classroom behavior, easy access to drugs and living in poverty.

Adverse childhood experiences

When children experience prolonged adversity at home, it creates toxic stress. These adverse childhood experiences (ACEs) disrupt brain development, making these children more likely to struggle with challenges like addiction as adults.

Women

Women's bodies process medication differently than men, and they experience a higher incidence of depression and anxiety, which can lead to substance abuse.

Co-Occurring issues

Addiction, mental illness and trauma often feed into one another. Many people struggling with addiction are dealing with co-morbid conditions such as hepatitis and other chronic medical concerns.

How prevalent is addiction in Tennessee?

More than 5% of Tennesseans — roughly 400,000 — use or abuse alcohol or drugs.

Tennessee is ranked third in the country for prescription drug abuse across all demographics. More than 70% of people who use prescription drugs for nonmedical reasons get them from friends or relatives.

Babies

More than 1,000 infants in Tennessee are born dependent on drugs each year. Neonatal abstinence syndrome (NAS) causes low birth weight, seizures, and health and social problems later in life.

- 50–70% of mothers who take opioids during pregnancy will give birth to a baby with NAS.
- Tennessee's rate of neonatal abstinence syndrome increased tenfold from 2000 to 2010.
 The U.S. experienced only a threefold increase during that time.

Teens

Roughly 38,000 Tennessee teenagers (7.4%) report using illicit drugs. Heavy substance use stops mental development, which can lead to serious problems in adulthood, including difficulty holding a job or parenting.

Young adults

Drug abuse among Tennesseans ages 18-25 is increasing, and they are using prescription opioids at a 30% higher rate than the national average.

Seniors

U.S. emergency departments saw a 78% rise in visits for older adults misusing prescription or illicit drugs between 2006 and 2012.

Incarceration

- 80% of crimes in Tennessee have some drug-related nexus Drug-related
- crimes increased by 33% from 2005-12
- 50% of kids in state custody are there because of parental drug use

In the juvenile justice system:

- 78% of offenses are substance involved
- 44% of offenders meet the clinical diagnosis for substance use problems

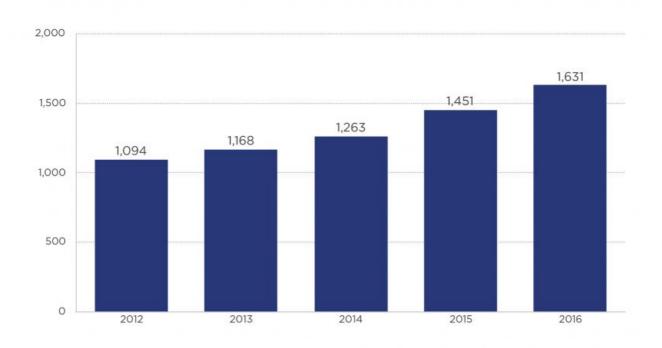
Incarceration can also contribute to the cycle of addiction. During incarceration, drugs may be available and resources few. Once released, people who struggle with addiction can face multiple barriers when trying to rebuild their lives, which can trigger relapse.

Overdose

In 2016, 1,631 people died from drug overdoses in Tennessee. It is the highest annual number of overdose deaths recorded in state history.

The five-year total for overdose deaths in Tennessee is 6,036. That is approximately the same number as every passenger on 40 mid-size jet liners.

Number of drug overdose deaths in Tennessee

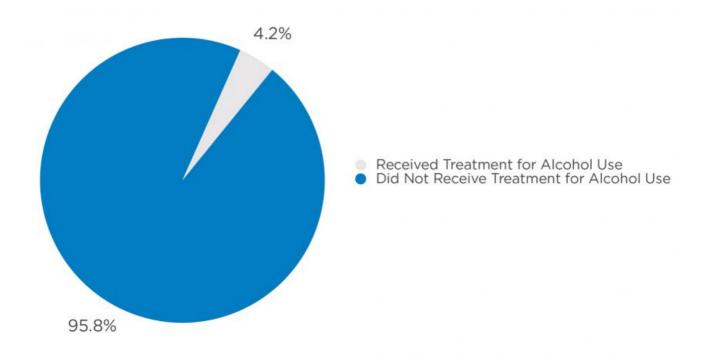


Treatment

Overwhelmingly, Tennesseans do not get the treatment they need.

In 2014, only 4% of Tennessee adults in need of addiction treatment actually received services.

Treatment for alcohol abuse among Tennesseans 12+



Can you prevent addiction?

Addiction cannot be cured, but it can be prevented and treated with medication, counseling, and/ or support from family and friends.

1. Policy

The laws surrounding opioid prescription and dosages are changing:

- The Prescription Safety Act of 2012 requires all physicians who dispense pain medications to register with the state and to check and record all controlled substances prescribed in a statewide database.
- The Chronic Pain Guidelines, released in 2014, were created to help doctors treat patients with ongoing severe pain while lessening the risk of unintentional addiction from long-term prescription drug use.

Between 2013 and 2015, the number of opioid prescriptions in Tennessee dropped by 1.1 million.

2. Physicians

Physicians are helping by:

- Decreasing narcotic prescriptions for chronic pain
- Using medication-assisted therapy to treat narcotic addiction and save lives Creating
- new practices based on research in fields like detoxing mothers safely during pregnancy

3. Community

Tennessee's public health approach was adopted in 2016 and includes steps to improve:

- Primary prevention
- Monitoring and surveillance of prescriptions
- · Regulation and enforcement of laws
- Use of treatment
- Access to appropriate pain management

Combatting overdose

While professionals agree prevention is the best way to fight addiction, Tennessee has seen marked success with first responders using a nasal spray delivery of naloxone, which counteracts overdoses with incredible effects.

Tennessee police have had 100% success with saves using Narcan.

Reducing the stigma

The recovery community maintains that a large part of fighting addiction, or substance use disorder, depends on:

- Reducing the stigma around addiction so people feel comfortable seeking help, and
- Putting a greater focus on a recovery-oriented system of care, empowering people to develop healthy coping skills and a quality support system.

How is BlueCross addressing addiction?

Charitable and community programs

The BlueCross BlueShield of Tennessee Health Foundation has contributed:

- More than \$3 million to fight neonatal abstinence syndrome in Tennessee
- \$2.1 million for the Count it! Lock it! Drop it! prescription drug drop-off program
- \$1 million to build a NAS Unit at East Tennessee Children's Hospital
- \$290,000 to Dayspring Family Health to help mothers of NAS babies get off drugs
- \$275,000 for substance abuse treatment programs in Memphis, Chattanooga, Nashville and Knoxville
- \$250,000 from the BlueCross Health Foundation to provide Narcan to first responders across the state, and \$35,000 to the Tennessee Law Enforcement Innovation Center to provide training on the use of Narcan
- \$100,000 to Susannah's House, an outpatient and drug treatment program for mothers in recovery
- \$50,000 to The Next Door to help them provide physical, emotional and spiritual rehabilitation for women in crisis

Member services and support

In addition to supporting charitable programs that benefit all Tennesseans, BlueCross has programs in place to support members affected by substance use disorder.

BlueCross provides behavioral health services to assist members dealing with substance

- abuse disorders and other related conditions.
 - A team of registered nurses and licensed, masters-level clinicians are available to provide
- advocacy, education, resources and support to members and families.
 Behavioral health care managers also work closely with pharmacy and medical professionals
- to address each member's total health needs.

Visit bcbst.com to learn more or access these services.