



NEWS RELEASE

**Health Commissioner
Dr. Gale Burstein**

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BURSTEIN RAISES ALERT ON RISKS OF METHADONE OVERDOSE

Heroin Treatment, Pain Reliever Involved in 1 of 3 Opioid-Related Deaths

ERIE COUNTY, NY— Erie County Health Commissioner Dr. Gale Burstein today called attention to a report released by the Centers for Disease Control and Prevention (“CDC”) emphasizing the risks associated with methadone use for pain relief. Methadone, an opioid pain reliever (“OPR”), is involved in one third of OPR-related deaths while it accounts for only a few percent of OPR prescriptions. Less than a quarter of methadone overdoses involve people who were enrolled in programs treating opioid addiction with methadone. Most people who overdosed with methadone were using it without a prescription.¹

“This study suggests that methadone contributes disproportionately to OPR overdoses. Health care providers should be very judicious in OPR prescribing,” **said Burstein**. “Methadone has a long half-life, can have negative interactions with other drugs, and can cause disruptions in cardiac rhythm. The potential for methadone abuse should be taken very seriously, and every prescription should be carefully evaluated.”

U.S. physicians have used methadone as a treatment for heroin addiction since the 1960’s and increasingly as a treatment for chronic noncancer pain since the mid-1990’s.² Individual states began to report increasing numbers of overdose deaths involving methadone in 2003.³ Recent analyses have shown that methadone was involved in one in three opioid-related deaths in 2008.⁴ Additional analysis of emergency department (“ED”) data indicates that the estimated number of ED visits resulting from nonmedical use of methadone alone or in combination with other drugs in 2009 (63,031) was

¹ Substance Abuse and Mental Health Services Administration. Data summary: methadone mortality, a 2010 reassessment. Rockville, MD: US Department of Health and Human Services, Substance Abuse and Mental Health Services Administration; 2010. Available at http://www.dpt.samhsa.gov/pdf/methadone_mortality_data_2010.pdf

² US Government Accountability Office. Methadone-associated overdose deaths; factors contributing to increased deaths and efforts to prevent them. [GAO-09-341] Washington, DC: US Government Accountability Office; 2009. Available at <http://www.gao.gov/products/gao-09-341>

³ Ballesteros MF, Budnitz DS, Sanford CP, Gilchrist J, Agyekum GA, Butts J. Increase in deaths due to methadone in North Carolina. JAMA 2003; 290:40

⁴ Warner M, Chen L, Makuc D, Anderson R, Minino A. Drug poisoning deaths in the United States, 1980-2008. NCHS Data Brief, no 81. Hyattsville, MD: National Center for Health Statistics; 2011. Available at <http://www.cdc.gov/nchs/data/databriefs/db81.htm>.

almost 50% higher than the estimated number in 2004 (36,806).⁵ Furthermore, the rate of overdose deaths involving methadone in the United States in 2009 was more than 5.5 times the rate in 1999.

“Methadone should not be used for mild pain, acute pain, or on an as-needed basis for pain relief,” **Burstein continued.** “Prescribers should also be aware of drug interactions, they should have substantial knowledge of the advantages and disadvantages of methadone, and they should not prescribe methadone to patients who have never taken opioids. Providers should also instruct patients about the potential risks associated with methadone, including information on how to store and dispose of it properly, as well as other options for pain relief.”

Population-based counts of 2009 methadone and other opioid-related deaths in 13 states participating in the Medical Examiner component of the Drug Abuse Warning Network (DAWN). State medical examiners provide information on all drug-related deaths, and CDC analyzes the deaths involving an opioid, whether in combination with other drugs or by itself.

To read the Centers for Disease Control report “Vital Signs: Risk for Overdose from Methadone Used for Pain Relief – United States, 1999-2010”, visit

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6126a5.htm?s_cid=mm6126a5_w

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⁵ Substance Abuse and Mental Health Services Administration Center for Behavioral Statistics and Quality. The DAWN report: methadone-related emergency department visits involving nonmedical use. Rockville, MD: Substance Abuse and Mental Health Services Administration; 2012. Available at http://www.samhsa.gov/data/2k12/web_dawn_022/methadone_er_nonmedical.pdf