

Opioid & Substance Data among American Indian & Alaska Native People

Crisandra Wilkie, MPH
Substance Use Epidemiologist
Northwest Portland Area Indian Health Board (NPAIHB)

didgwálič Immersion Training, January 18, 2024



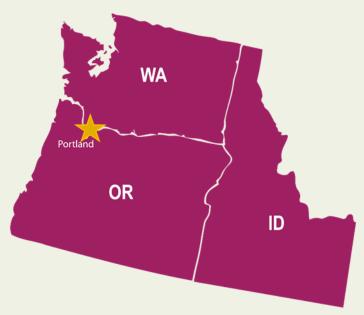
Where do I work?

Northwest Tribal Epidemiology Center (NWTEC)

- Housed within the Northwest Portland Area Indian Health Board (NPAIHB)
- One of 12 Tribal Epicenters across the US

Our organization provides epidemiological and public health support for the **43 federally recognized tribes** in a three-state region: Washington, Oregon, and Idaho (~300,000 AI/AN)

- If you are in the NW region, contact me for data assistance!
- If you are located outside the NW, contact your EpiCenter! https://tribalepicenters.org/

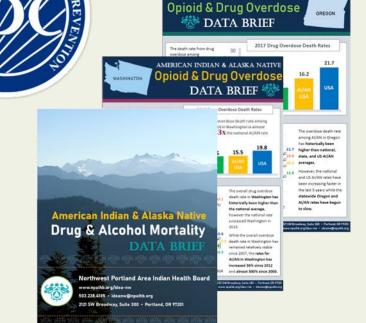




Tribal Public Health Infrastructure Grant (TEC-PHI)

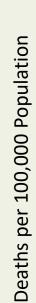
 Grant from the Centers for Disease Control (CDC) to Tribal Epidemiology Centers

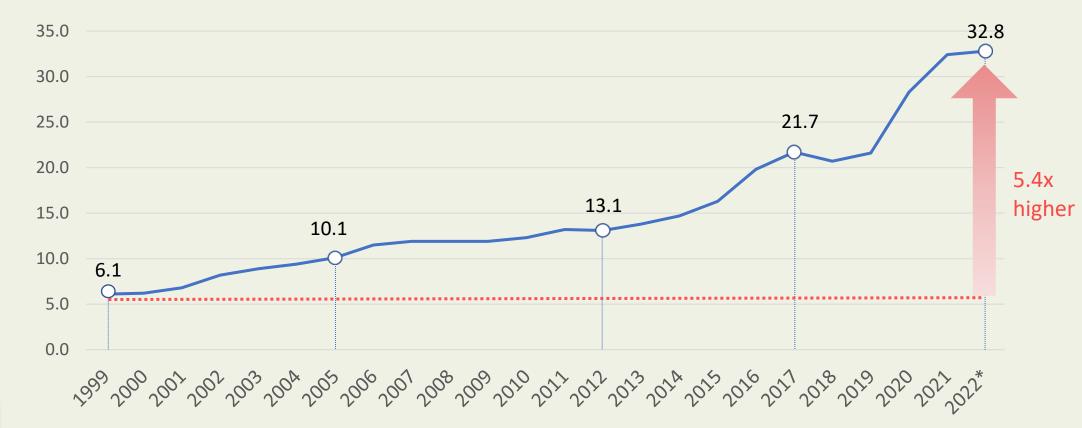
- Specific section on opioid & substance data capacity building
 - Produce substance use data reports for AI/AN
 - Available online: http://www.npaihb.org/idea-nw/
 - Assist NW tribes with substance use data needs
 - Contact me! <u>cwilkie@NPAIHB.org</u>
 - Gain access to additional opioid/substance state & federal data sources
 - Work with partners to address racial misclassification in data systems













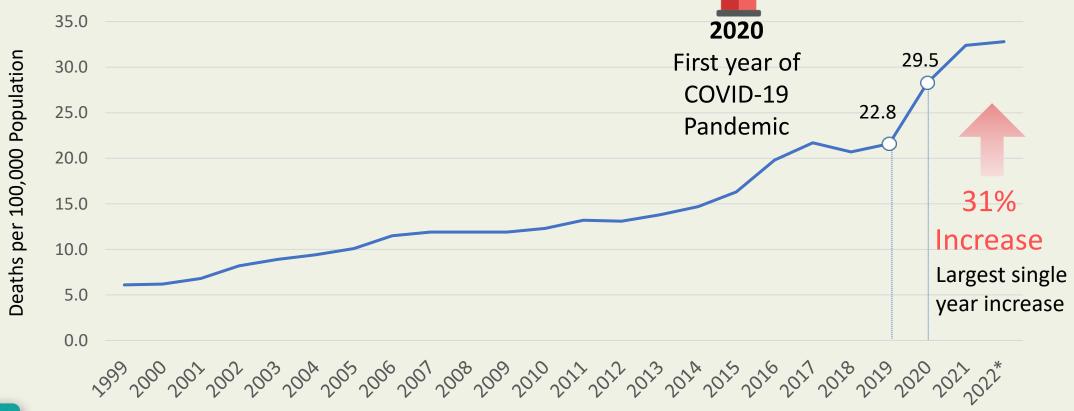
*Data for 2022 is preliminary







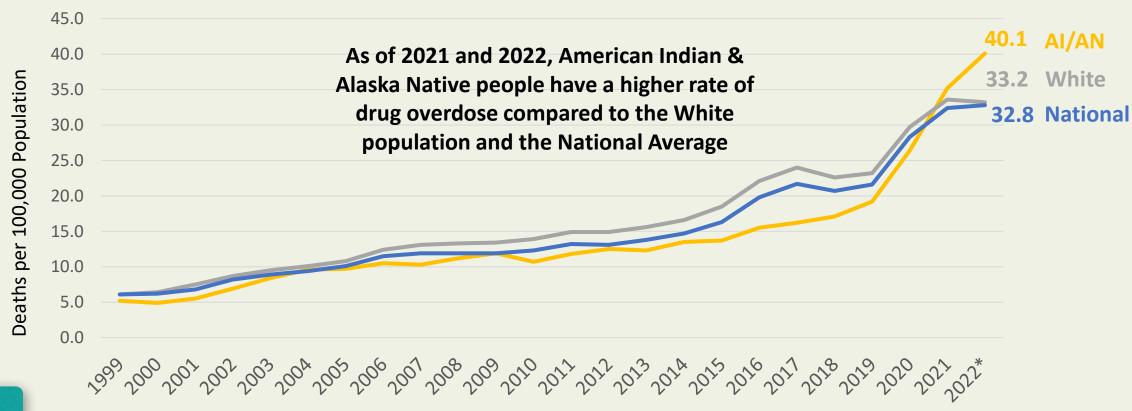
*Data for 2022 is preliminary





*Data for 2022 is preliminary



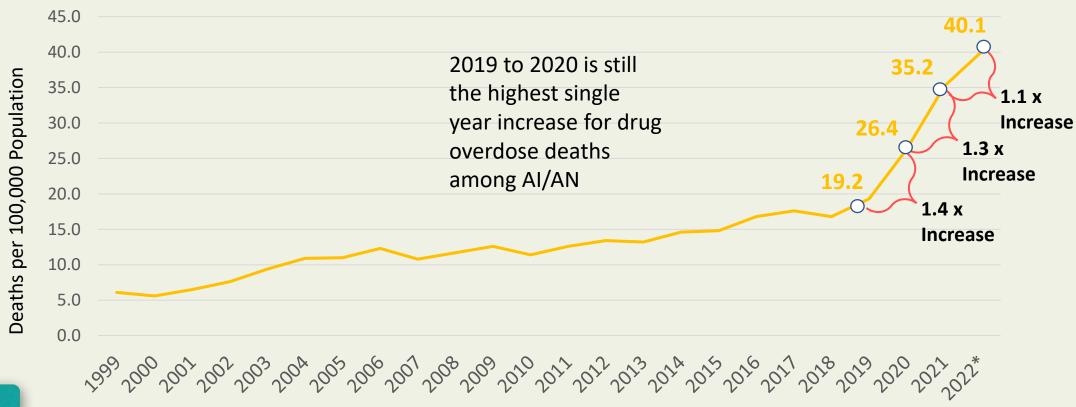




*Data for 2022 is preliminary

National Drug Overdose Deaths: AI/AN Rate

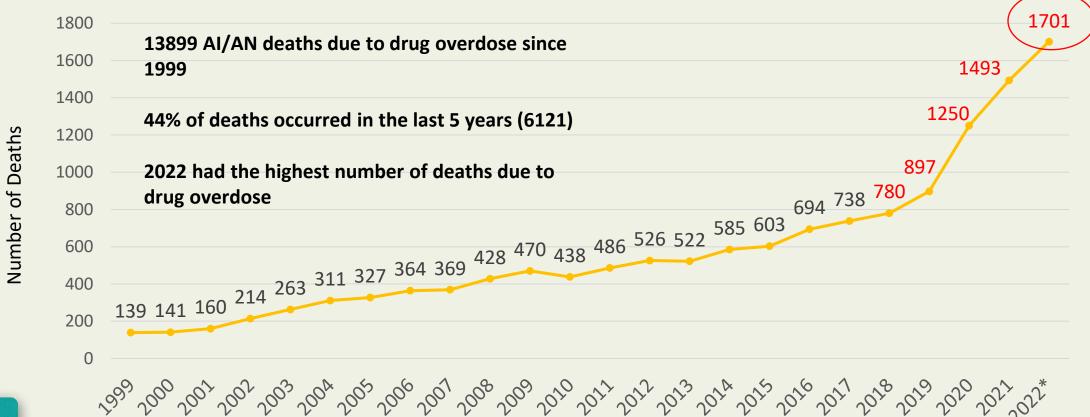






*Data for 2022 is preliminary

National Drug Overdose Deaths: AI/AN Number of Deaths





*Data for 2022 is preliminary

What Drugs are Involved?











National AI/AN Drug Overdose Deaths: Which Drugs?



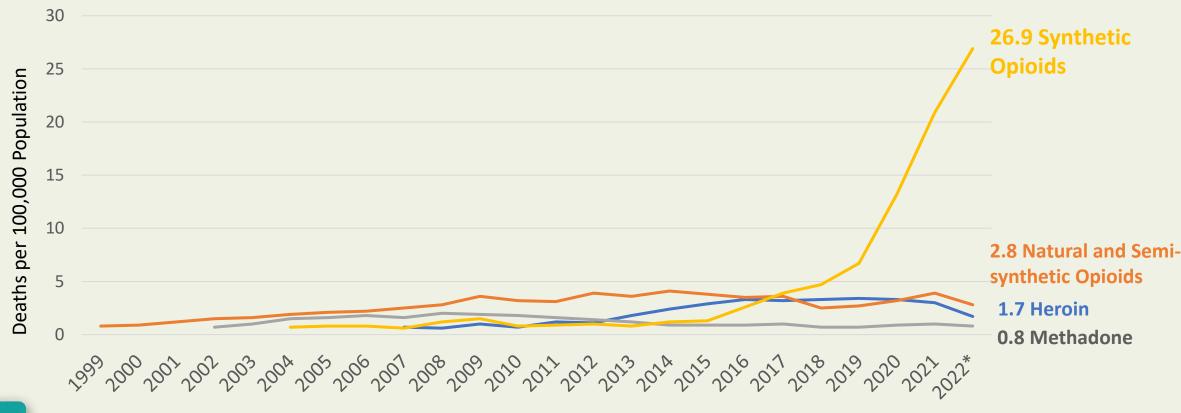




*Data for 2022 is preliminary

National AI/AN Drug Overdose Deaths: Which Opioids?







*Data for 2022 is preliminary

National AI/AN Drug Overdose Deaths: Prescription Opioids



Synthetic Opioids Include:

- Fentanyl
- Tramadol

Natural and Semi-synthetic Opioids Include:

- Hydrocodone
- Oxycodone (OxyContin, Percocet)
- Morphine
- Hydromorphone (Dilaudid)

The NIH National Institute on Drug Abuse reports that fentanyl now makes up most of this category of drugs¹

Note: The individual may or may not have had a valid prescription for the drug. It could have been obtained illegally.



National AI/AN Drug Overdose Deaths: Fentanyl

- Fentanyl is 50-100 times stronger than morphine
 - 2 mg of fentanyl equates to a potentially deadly dose
- Originally developed for cancer patients (pain)
- Manufactured as a pharmaceutical, but increasingly manufactured illegally
- Illegally manufactured to look like other opioid pills or added to other drugs, often unknown to the person consuming it



- 1. https://www.dea.gov/factsheets/fentanyl
- 2. https://www.dea.gov
- 3. https://www.dea.gov/onepill



DEA Fentanyl Seizures in 2022:

- 59.6 million fentanyl-laced fake pills
- More than 13,300 pounds of fentanyl powder
- These seizures are equivalent to more than
 398 million lethal doses of fentanyl

National AI/AN Drug Overdose Deaths: Other Drugs?



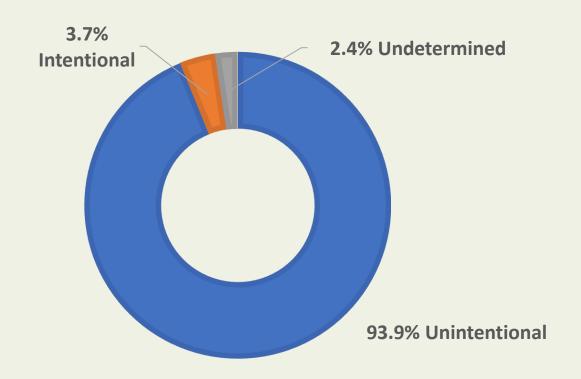




*Data for 2022 is preliminary

National AI/AN Drug Overdose Deaths: Overdose Intent, 2018-2022*





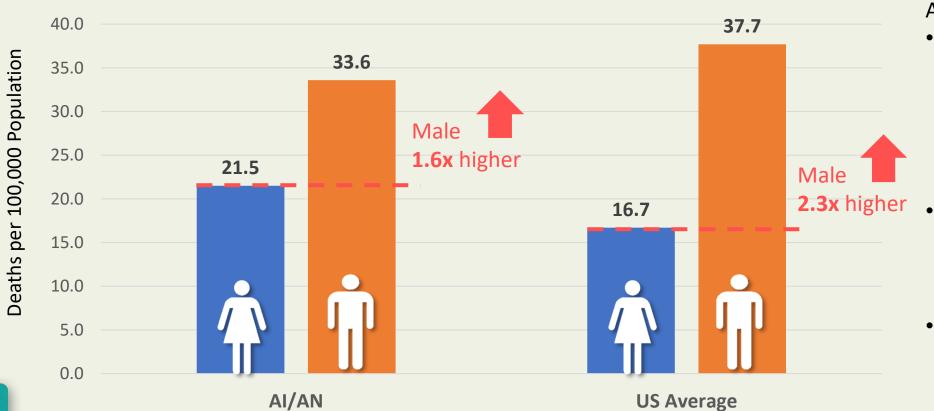
- Most AI/AN overdose deaths were unintentional (accidental).
- 3.7% of overdose deaths were intentional (suicide)
- In some cases, the intent could not be determined



*Data for 2022 is preliminary; Homicide suppressed due to small numbers

National Drug Overdose Deaths: By Sex, 2018-2022*





All Drugs:

- Less difference in rates between
 AI/AN males and females compared to US average
- AI/AN female rate

 1.3x that of the US
 female rate
- AI/AN male rate is lower than the US male rate

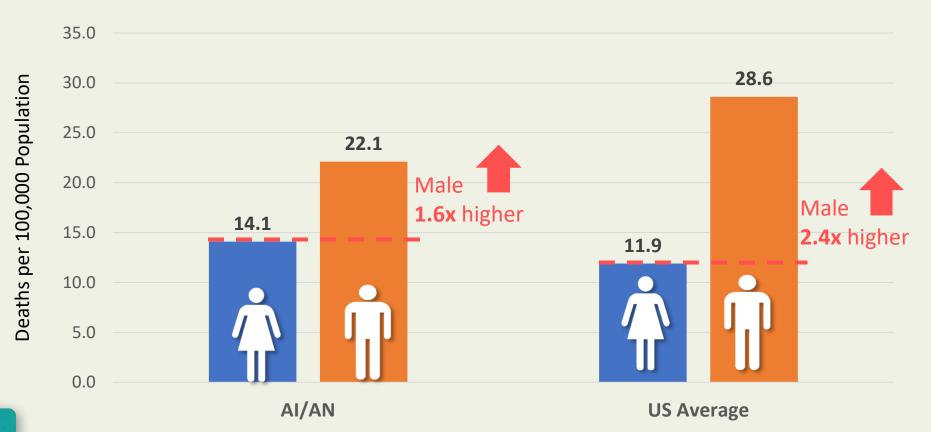
NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD Indian Leadership for Indian Health

*Data for 2022 is preliminary

NPAIHB

National Drug Overdose Deaths: By Sex, Opioids, 2018-2022*





Opioids:

- Less difference in rates between
 AI/AN males and females compared to US average
- AI/AN female rate
 1.2x that of the US
 female rate
- AI/AN male rate is lower than the US male rate

*Data for 2022 is preliminary

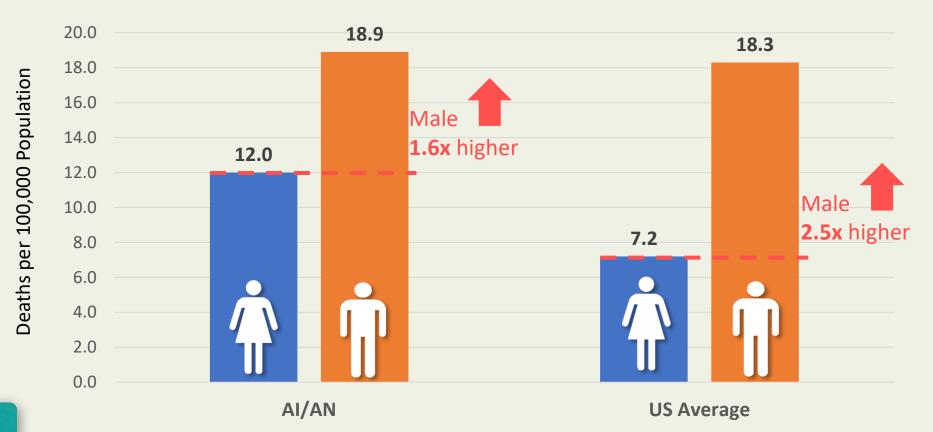
NPAIHB

*Data for 2022 is preliminary

Indian Leadership for Indian Health

National Drug Overdose Deaths: By Sex, Stimulants, 2018-2022*





Stimulants:

- Less difference in rates between
 AI/AN males and females compared to US average
- AI/AN female rate

 1.7x that of the US
 female rate
- Male AI/AN rate is similar to the US male rate

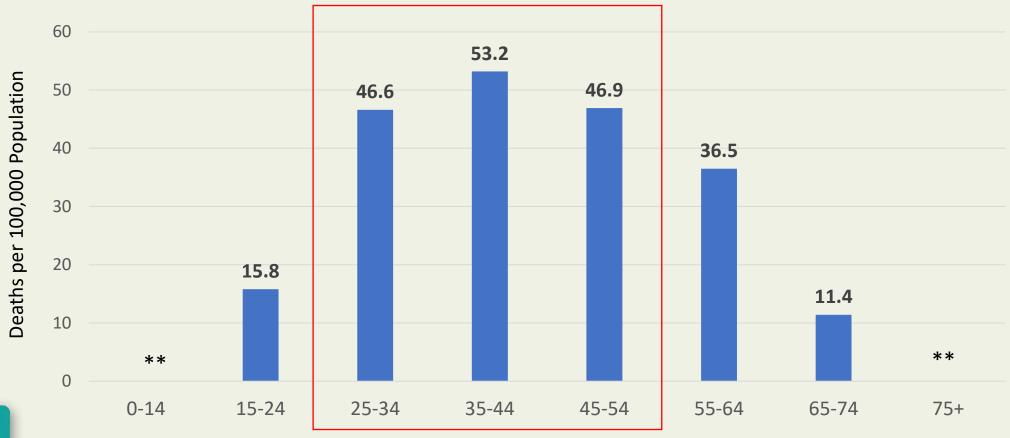
NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD Indian Leadership for Indian Health



NPAIHB

National AI/AN Drug Overdose Deaths: By Age, 2018-2022*



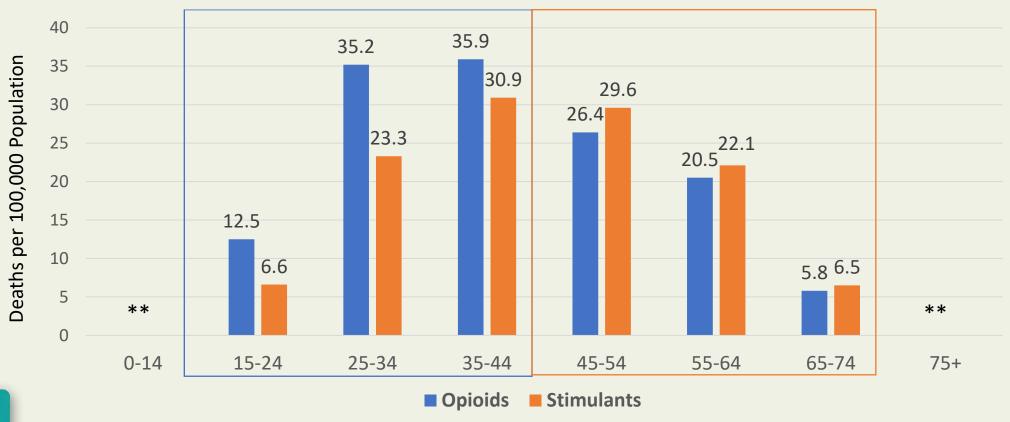




*Data for 2022 is preliminary; **Rate suppressed or unreliable due to small count

National AI/AN Drug Overdose Deaths: By Age & Drug, 2018-2022*

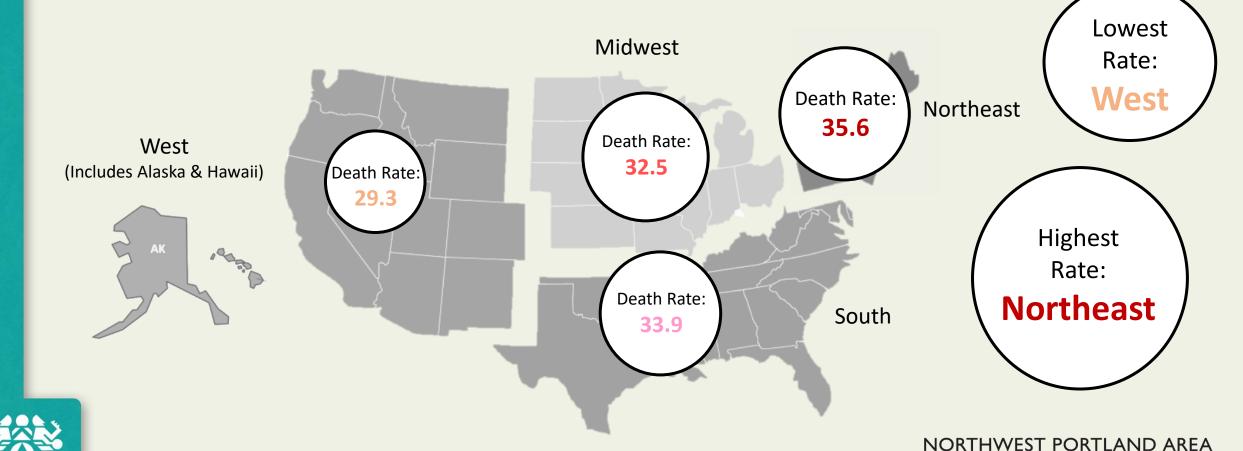






*Data for 2022 is preliminary; **Rate suppressed or unreliable due to small count

National All Population Drug Overdose Deaths: By Census Region, 2022* Rates



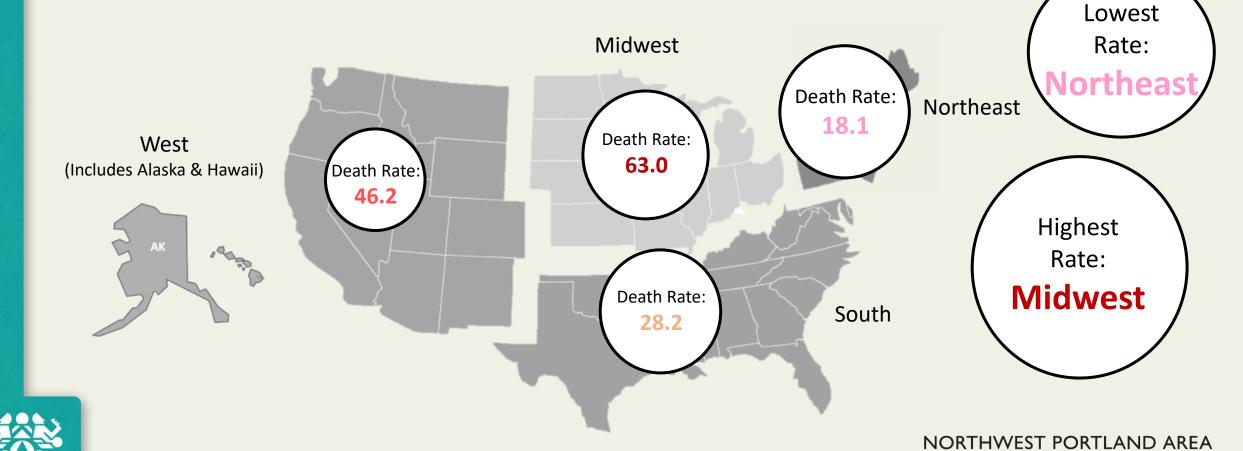
INDIAN HEALTH BOARD

Indian Leadership for Indian Health

*Data for 2022 is preliminary

NPAIHB

National AI/AN Drug Overdose Deaths: By Census Region, 2022* Rates



*Data for 2022 is preliminary

NPAIHB

National Age-Adjusted Rates per CDC NCHS Multiple Cause of Death Files 1999-2020 and from provisional data for years 2021-2022 on CDC WONDER Online Database

INDIAN HEALTH BOARD

Indian Leadership for Indian Health

Opioid and Overdose Epidemiology Data Challenges

- Racial misclassification
 - Many AI/AN are not classified as AI/AN in state data systems
 - = underrepresentation of burden on AI/AN
- Limited access to behavioral health/treatment data
 - Hard to know how many people have SUD in the community or are being treated for SUD
- Difficulty obtaining tribe-specific data
 - Can only provide state or county data
- Inconsistency in overdose cause of death reporting
 - What drug(s) actually involved?
 - "Unspecified Narcotic"



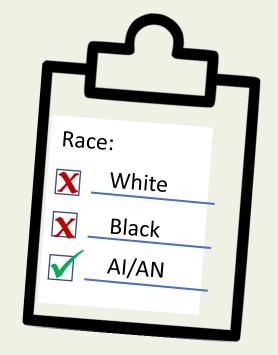


What is racial misclassification?

 Racial misclassification is an incorrect recording of a person's race in a data or surveillance system

Examples:

- A person who is American Indian is coded as "white" on their death certificate
- A person who is American Indian and Black is recorded as only "Black" on their hospital visit record
- A person who is American Indian is recorded as "Hispanic
 White" at their doctor's office





Why does misclassification matter?

Misclassified AI/AN are not counted in AI/AN health reports, disease rates, or public health surveillance

Leads to an underrepresentation of AI/AN and:

- Inaccurate AI/AN health data
- Artificially lowered disease burden
- Too few AI/AN to calculate stable disease rates and trends
- Incomplete health data for public health decision-making





Take Away Messages

- Deaths from drug overdoses are increasing over time
 - Steep increase since start of COVID-19 pandemic (2020)
- Most overdose deaths involve opioids, synthetic opioids (specifically fentanyl) are most common
- Deaths involving stimulants (mostly methamphetamine) are increasing
- Male AI/AN have higher rates of overdose compared to female AI/AN, but lower rates of overdose compared to the US male average (except for stimulant-related deaths, about the same as US average)
- Female AI/AN have higher stimulant-related overdose deaths compared to the US female average
- The Midwest region has the highest rate of AI/AN overdose deaths, followed by the West
 - This differs from the US average where the West and Midwest have the lowest rates
- National and state statistics may significantly underestimate AI/AN statistics



Thank You! Questions?

Crisandra Wilkie, MPH

Substance Use Epidemiologist
Northwest Portland Area Indian Health Board

CWilkie@NPAIHB.org

