



# DATA SHORTS

## The Spreading Use of Heroin in Maryland

There are several indicators that provide very good information about trends in the use of heroin. Data Short 3-10 examined the increase in the number of people in Maryland whose deaths were related to a heroin intoxication overdose from 2010 to 2013. Preliminary data for 2014 suggest that the upward trend is continuing and that heroin-related overdose deaths have increased by nearly 145% since 2010. This Data Short will examine some trends in the “treated prevalence” for heroin addiction (i.e., people admitted to treatment for heroin problems). Admissions to Maryland state-supported drug treatment programs for Fiscal Years 2008 to 2014 are examined. (Note that, for each admission, up to three substance-specific problems may be reported.)

The first graph shows the percentages of all admissions to state-funded programs broken into four categories: heroin with no prescription opioid involvement, heroin along with prescription opioid involvement, prescription opioids with no heroin, and all other admissions (non-heroin related). The percentage of individuals entering treatment for heroin with no prescription opioid involvement increased from 28% in FY 08 to 33% in FY 14. Those seeking treatment for heroin with a co-occurring prescription opioid problem increased from 2% in FY 08 to 5% in FY 14. Both percentages show generally increasing trends over this time period.

In the second and third graphs, the analysis is limited to just those admissions with heroin cited as one of the three problem drugs. The second graph displays these in three geographical categories: Baltimore City, suburban areas, and rural areas. While heroin-related admissions decreased among Baltimore City residents, they increased among residents of suburban and rural areas of the state, with the greatest increase seen in rural counties. There was minimal if any change in the number and location of treatment slots over the time period, so these changes in admission patterns do not appear to be the result of changes in access to treatment.

The final graph displays admissions related to heroin for two age categories: those age 30 and younger, and those over age 30. While the number of admissions for those over 30 has been relatively stable over this period, the number age 30 and under has increased dramatically, more than doubling over the years from FY 08 to FY 14.

These data show several clear trends. Use of heroin appears to be increasing in all areas of the state except Baltimore City, and the increase in heroin usage is among younger people. While it is not expressly shown in the graphs, treatment admissions for problems with the use of prescription opioids have declined in the past two years ([http://bha.dhmdh.maryland.gov/Documents/Publications/FY14OandO\\_6edited2.pdf](http://bha.dhmdh.maryland.gov/Documents/Publications/FY14OandO_6edited2.pdf), Table 3). This may be, in part, the result of increased efforts to control distribution of these drugs, such as the State’s recent launch of a Prescription Drug Monitoring Program (PDMP). Consequently, illegal access to prescription opioids is becoming more difficult and costly. There is some evidence that many who were previously using these drugs inappropriately have turned to heroin because it is less expensive and relatively more available.

