

Society of Medical Administrators Public Health Update January 13, 2018

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Today's Agenda



New York Times

Life Expectancy in U.S. Declines Slightly, and Researchers Are Puzzled

By [KATIE ROGERS](#), DEC. 8, 2016

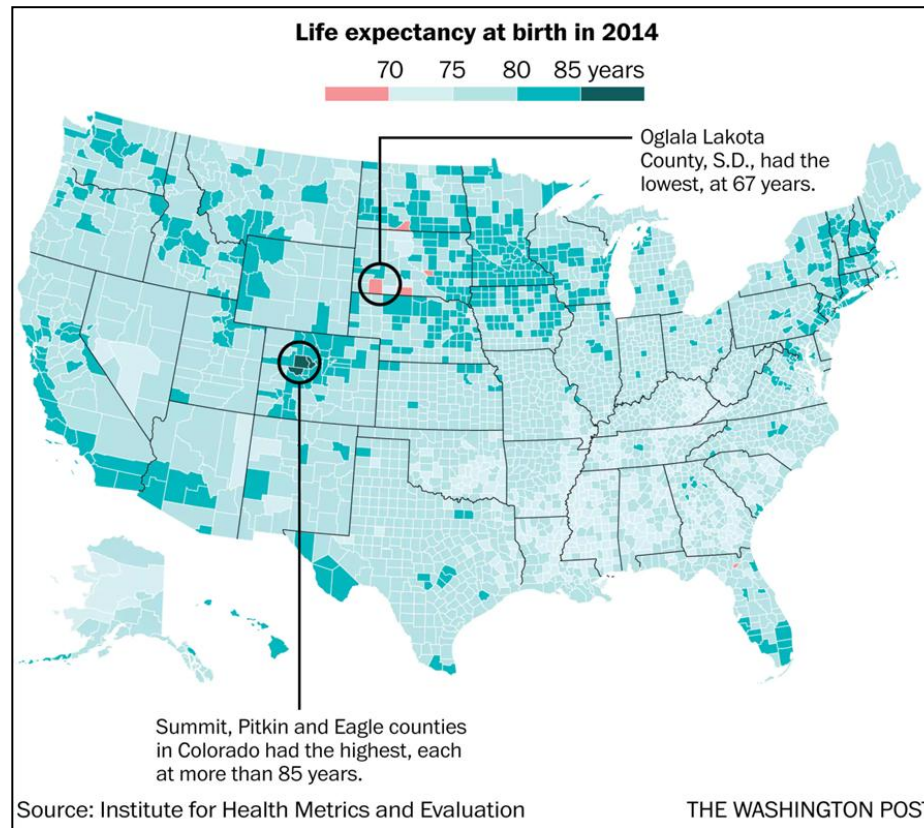
“American life expectancy is in **decline for the first time since 1993, when [H.I.V.](#)-related deaths were at their peak**. But this time, researchers can’t identify a single problem driving the drop, and are instead pointing to a number of factors, from heart disease to suicides, that have caused a greater number of deaths.”

“A study on mortality rates [released](#) on Thursday by the National Center for Health Statistics showed that Americans could expect to live for 78.8 years in 2015, **a decrease of 0.1 from the year before**. **The overall death rate increased 1.2 percent — that’s about 86,212 more deaths than those recorded in 2014.**”

The Washington Post

U.S. life expectancy varies by more than 20 years from county to county

By [Joel Achenbach](#), May 8, 2017



The Atlantic Magazine

A Shocking Decline in American Life Expectancy

[OLGA KHAZAN](#), DEC, 21, 2017

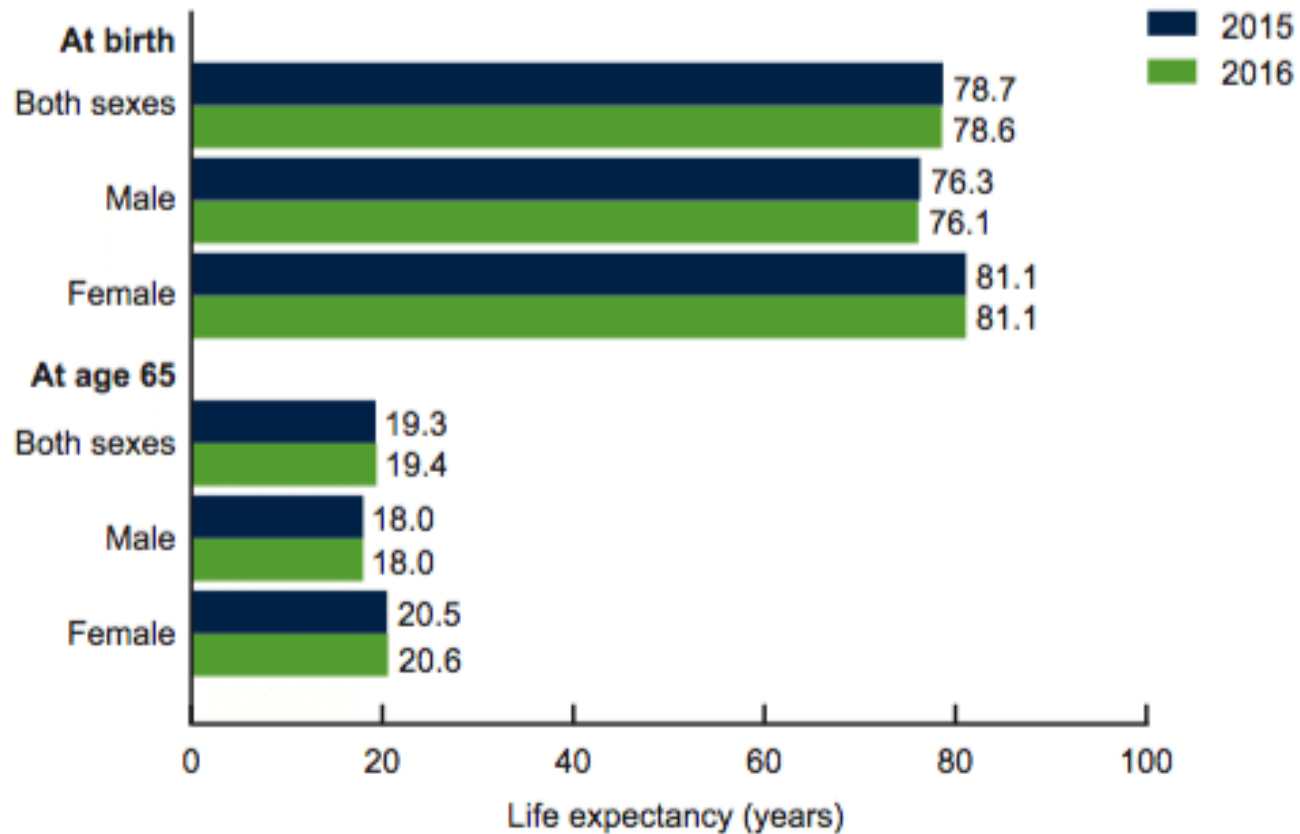


“Because of the opioid epidemic, Americans have been dying younger for two years in a row”

Atlantic Magazine

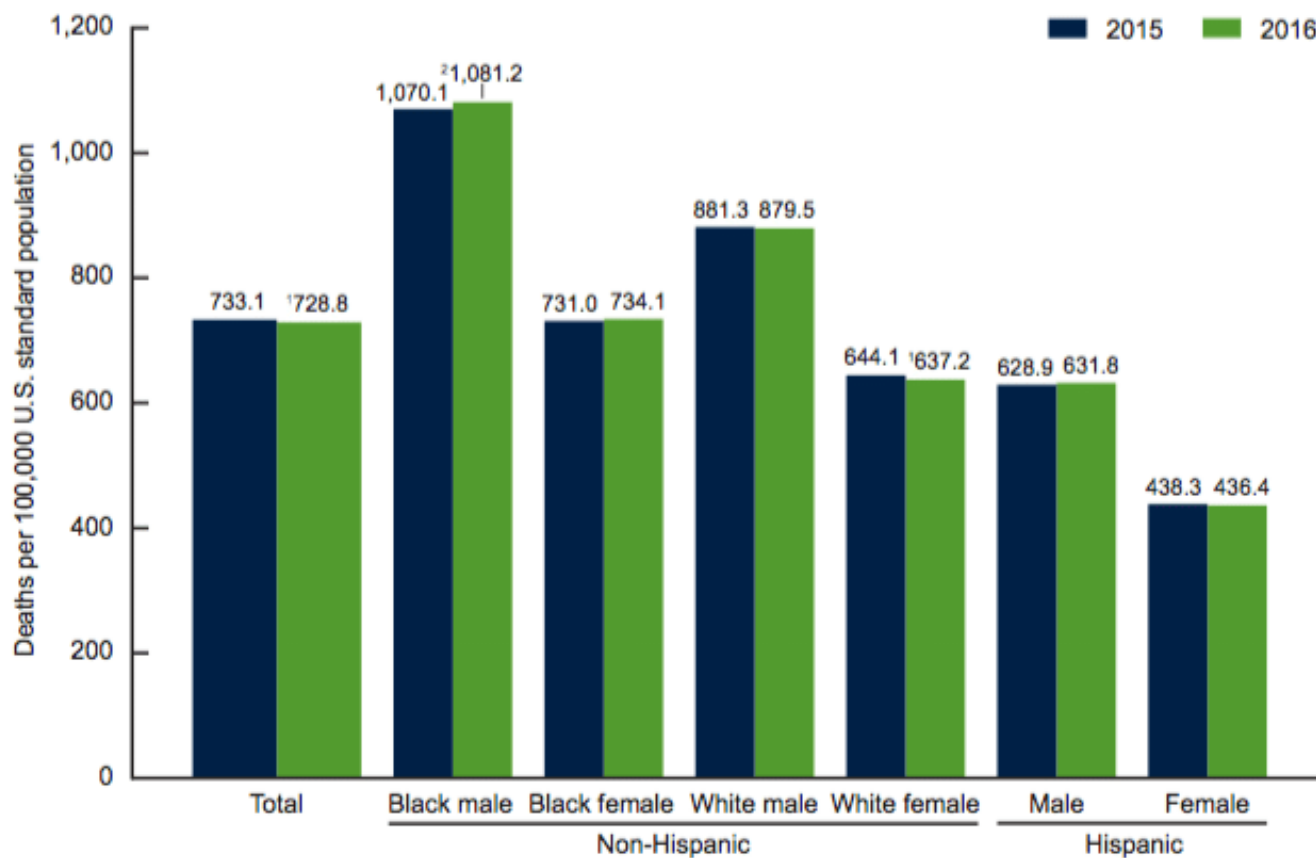
- For the first time since the early 1960s, life expectancy in the United States has declined for the second year in a row, according to a CDC report released Thursday. American men can now expect to live 76.1 years, **a decrease of two-tenths of a year from 2015**. American women's life expectancy remained at 81.1 years.
- The change was **driven largely by a rising death rate among younger Americans**. The death rate of people between the ages of 25 and 34 increased by 10 percent between 2015 and 2016, while the death rate continued to decrease for people over the age of 65.
- The **only racial group that saw a significant increase in their death rate between 2015 and 2016 were black men**: Their age-adjusted mortality rate increased by 1 percent.
- “What you see this year is a **leveling off of the gains that we've had over the years, especially with heart disease and cancer,**” among black men, said Garth Graham, the president of the Aetna Foundation and former head of the U.S. Office of Minority Health. “And the opioid epidemic is starting to overtake whatever gains we've made in that sector.”

Life Expectancy by Age

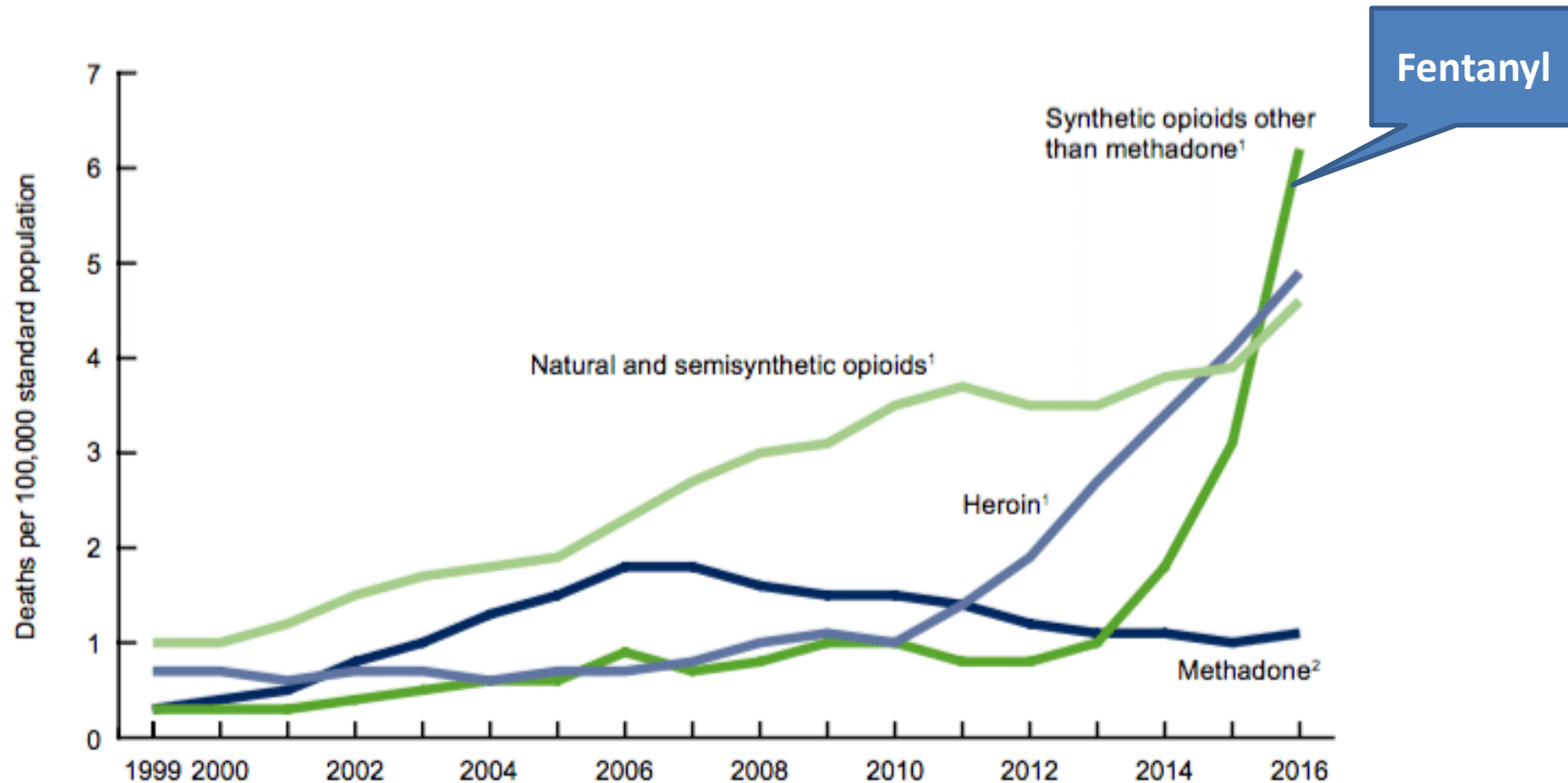


CDC

Age-Adjusted Death Rate, by Race and Sex



Age-Adjusted Drug-Overdose Death Rates, by Opioid Category



The Public Health Issues

- Scope of the epidemic
- How we got here?
- What can we do?
- What are some research & development needs?

Scope of the Epidemic



Opioid Drug Use & Addiction

A Major Public Health Problem

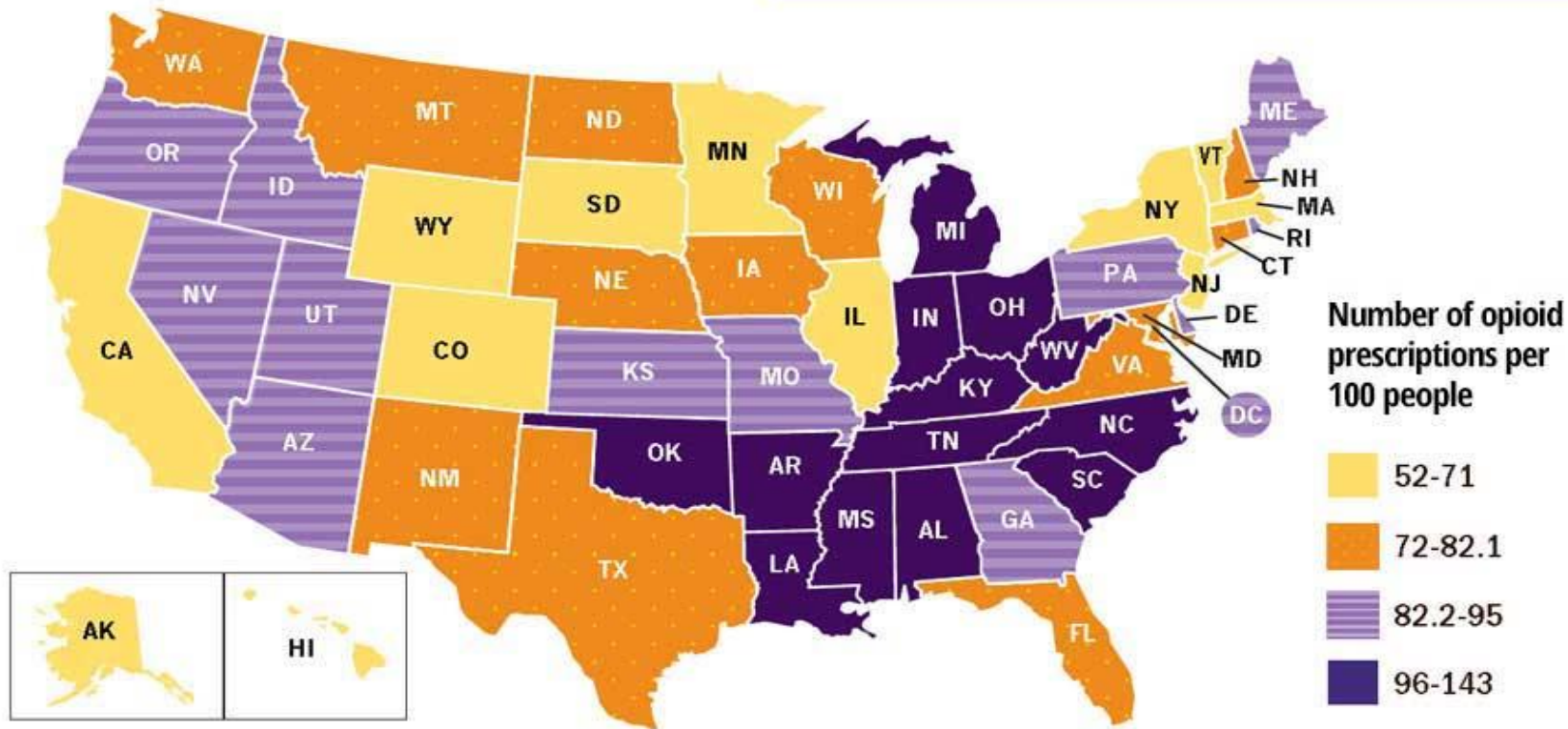
- Over **2.5 million Americans** have a “Substance Use Disorder” with opioid / heroin
 - 91 Overdose deaths / day
 - 1,000 Emergency Department visits / day
- Drug overdoses have risen dramatically since 1999
- Poisonings are now the leading cause of preventable death from injury (**Opioids are the major factor**)
- Opioids are also now a **major gateway** to heroin use

Demographics of Use

- Older adults (aged 40 years and older) are more likely to use prescription opioids than adults aged 20 – 39.
- More women than men
- Non-Hispanic whites more likely to use than Hispanics
- There are no significant differences in use between non-Hispanic whites and non-Hispanic blacks
- 75% are in the work place
- 7 / 10 companies report an impact on the workplace (Cost \$13,000 per employee)

Variability Based On Location

Some states have more opioid prescriptions per person than others.



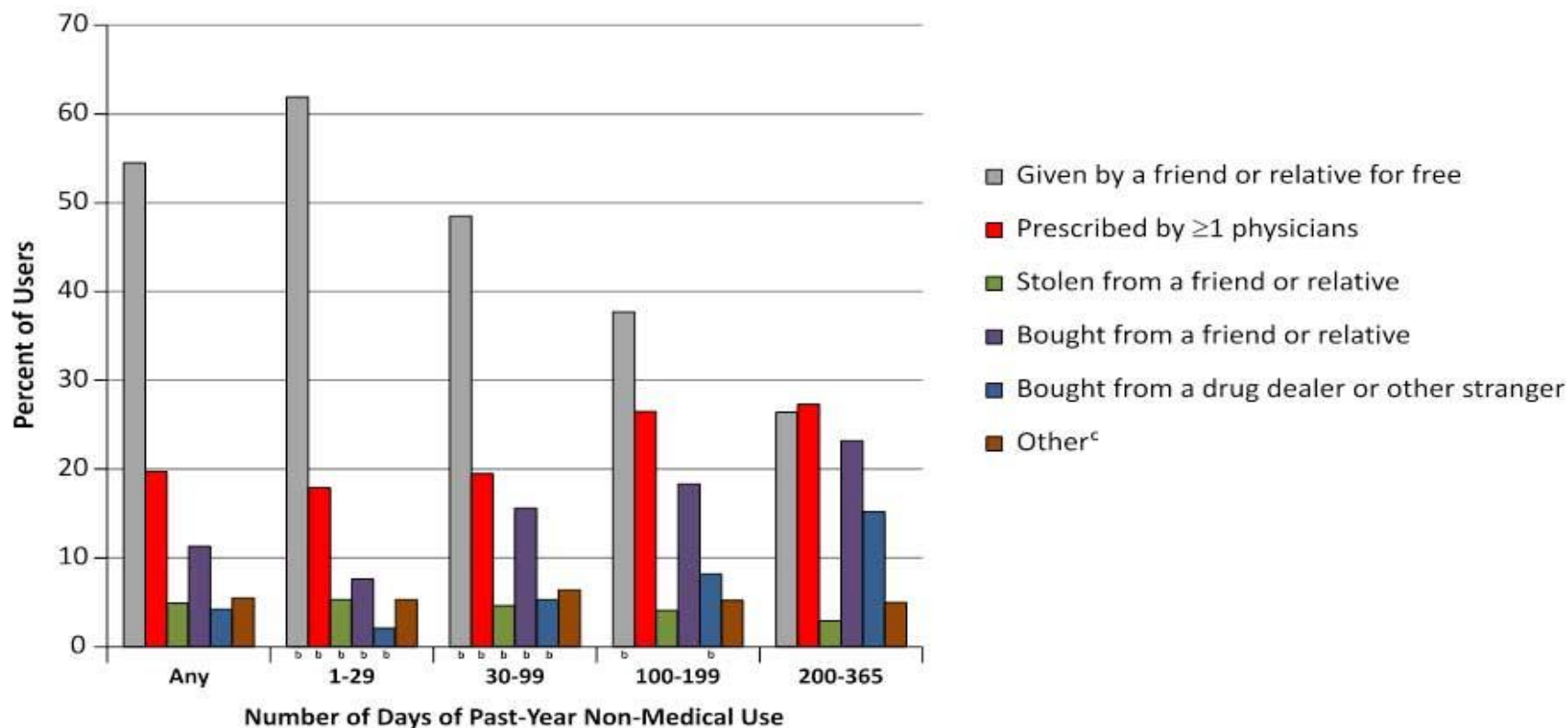
SOURCE: IMS, National Prescription Audit (NPA™), 2012.

How Did We Get Here?

- Pain as the 5th vital sign
- Underappreciation of addictive potential of opioids
- Aggressive marketing by pharma
- Use of opioids for chronic pain
- Over prescribing for many pain conditions
- Prescribing amounts excessive & “just in case” prescriptions
- Pass around market & recreational use
- Illegal markets
- Cheap heroin



Sources of Prescription Opioids Among Past-Year Non-Medical Users^a



^a Obtained from the US National Survey on Drug Use and Health, 2008 through 2011.⁵

^b Estimate is statistically significantly different from that for highest-frequency users (200-365 days) ($P < .05$).

^c Includes written fake prescriptions and those opioids stolen from a physician's office, clinic, hospital, or pharmacy; purchases on the Internet; and obtained some other way.

SOURCE: Jones C, Paulozzi L, Mack K. Sources of prescription opioid pain relievers by frequency of past-year nonmedical use: United States, 2008–2011. JAMA Int Med 2014; 174(5):802–803.

What Can We Do?



Public Health Efforts

- Improve surveillance systems
- Optimize access to pharmacotherapy for pain
- Reduce access to illegal opioids & address abuse
- Expand treatment for evidenced based substance abuse overall
 - Especially for Medication-Assisted Treatment (MAT)
- Expand access and use of naloxone

What Are Some Research & Development Needs?



Research & Development Needs

1. FDA needs to development of a formal method to incorporate the broader public health impact of opioid abuse in future FDA approval decisions regarding opioids
2. Develop more non-opioid pain medicines for severe pain
3. Develop abuse-deterrent opioids
4. Incorporate more prevention strategies into safe opioid prescribing, including modification of the standard opioid indication statements
5. Develop more medicines for medication assisted treatment
6. Develop more therapies for opioid overdose

Issues For The New Year



Secretary Nominee Alex Azar II, JD



Prior Health Policy/Management Experience

- HHS General Counsel
- HHS Deputy Secretary
- President of Eli Lilly, USA

Stated Priorities

- Opioids
- Value vs volume
- Drug prices
- Affordable & accessible health care

Climate Change Impact Is Here: The Capacity To Respond Of Concern?



Influenza – Need To Always Maintain Core Public Health Capacity



- Severe Flu season
- Vaccine only 10% effective
- A(H3N2) strain

The Pirate Raids On The Prevention Fund Continues



- Growth delayed
- Used for a variety of non-preventive health care programs
- Raided for MACRA
- Raided again for the 21st Century Cures Act
- Raided again as a payfor for health budget
- At risk for full repeal or as a continuing payfor for other health programs

CDC will lose 12% of its budget with prevention fund repeal

Medicare For All: The Debate Is On



Questions



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The American Public Health Association champions the health of all people and all communities. We strengthen the profession of public health, promote best practices and share the latest public health research and information. We are the only organization that influences federal policy, has a 140-plus year perspective and brings together members from all fields of public health. Learn more at www.apha.org.



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