

National Institute on Drug Abuse (NIDA) Montana Opioid Summary

Last Updated May 2019

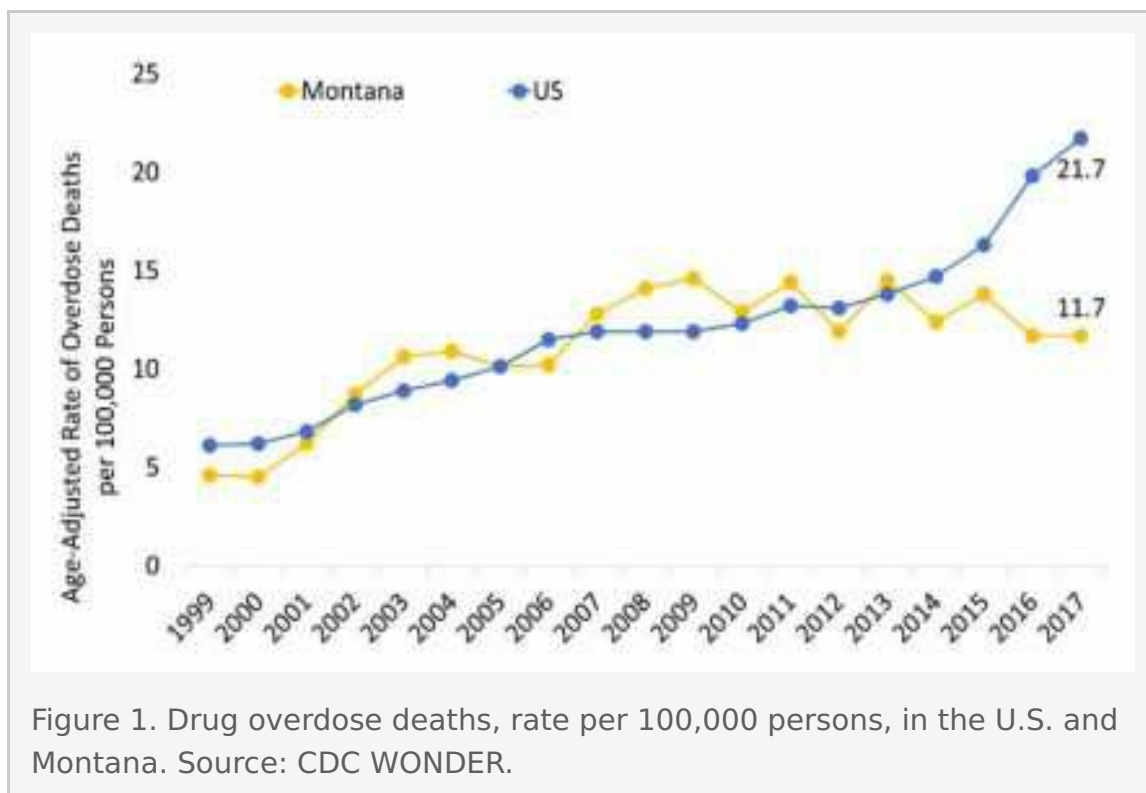
<https://www.drugabuse.gov>

Montana Opioid Summary

Drug Overdose Deaths

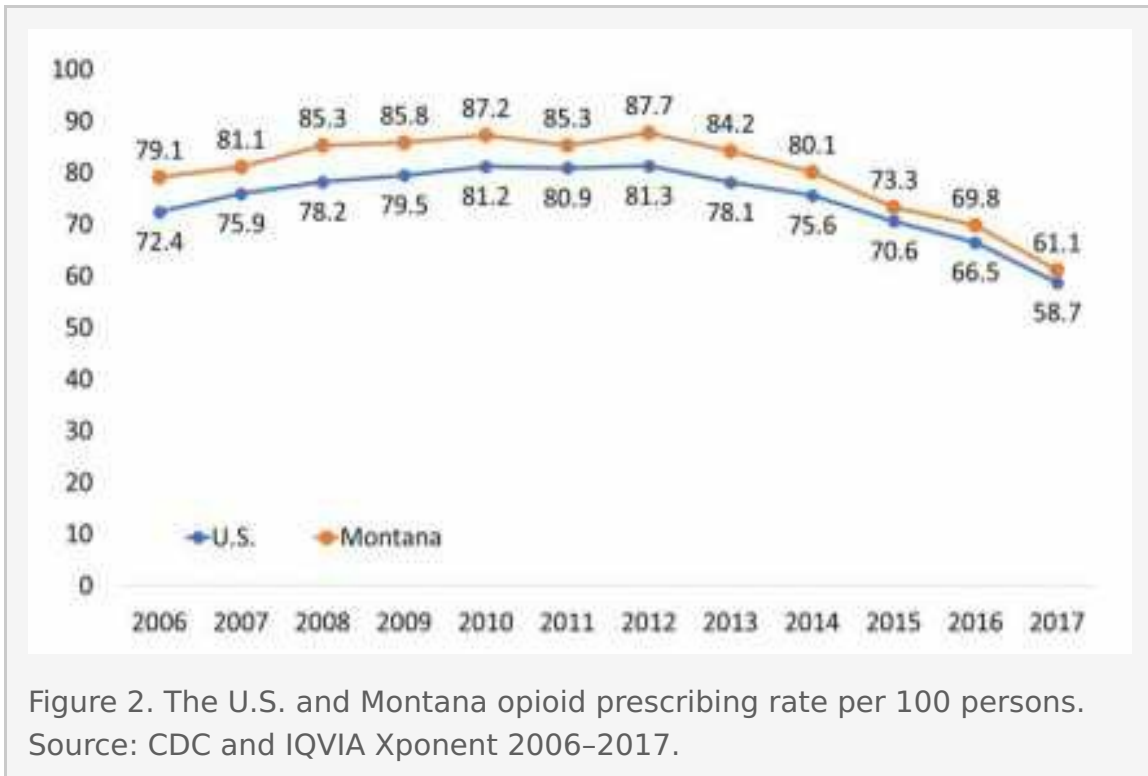
In 2017, there were more than 70,200 drug overdose deaths in the U.S.—an age-adjusted rate of 21.7 per 100,000 persons. Among these, 47,600 involved opioids. The sharpest increase occurred among deaths involving fentanyl and fentanyl analogs (other synthetic narcotics) with more than 28,400 overdose deaths in 2017.

The age-adjusted rate of drug overdose deaths has not significantly changed in Montana over the last several years. In 2017, there were 11.7 drug overdose deaths per 100,000 persons. While the majority of drug overdose deaths in 2017 involved an opioid, overdose deaths involving opioids are not included for the state because the data reported did not meet inclusion criteria (see [Scholl L, et al. MMWR Morbidity and Mortality Weekly Report 2019;67:1419-1427](#)).



Opioid Pain Reliever Prescriptions

In 2017, Montana providers wrote 61.1 opioid prescriptions for every 100 persons (Figure 2). The average U.S. rate in the same year was 58.7 prescriptions per 100 persons ([CDC](#)).



Neonatal Abstinence Syndrome (NAS)

NAS or neonatal opioid withdrawal syndrome (NOWS) may occur when a pregnant woman uses drugs such as opioids during pregnancy. A recent national study revealed a fivefold increase in the incidence of NAS/NOWS between 2004 and 2014, from 1.5 cases per 1,000 hospital births to 8.0 cases per 1,000 hospital births. This is the equivalent of one baby born with symptoms of NAS/NOWS every 15 minutes in the United States. During the same period, hospital costs for NAS/NOWS births increased from \$91 million to \$563 million, after adjusting for inflation (Figure 3).

To date, there is no standard in NAS/NOWS provider and hospital coding practices ([CDC](#)). As a result, there is variability in trends and in

the rate reported by states. The most recent data on the rate of babies born with NAS/NOWS in Montana is from 2014 and is based on state inpatient databases. From 2012 to 2014, the rate of NAS/NOWS increased 78 percent from 4.4 cases per 1,000 hospital births to 7.8 cases per 1,000 hospital births (Healthcare Cost and Utilization Project).

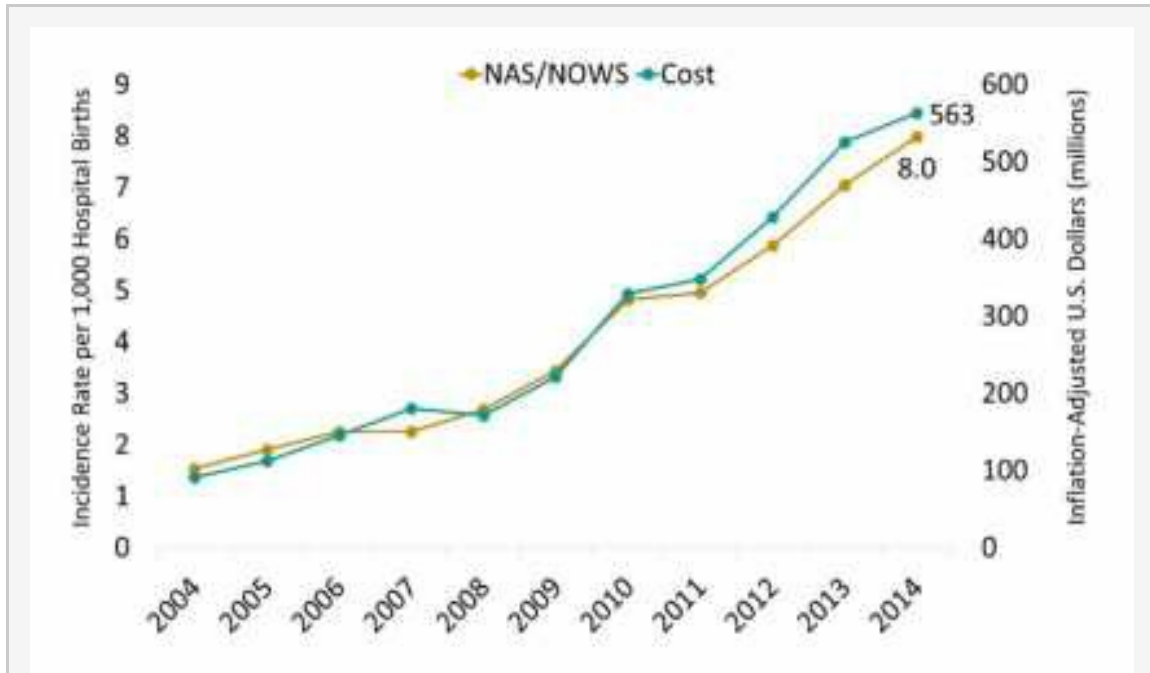
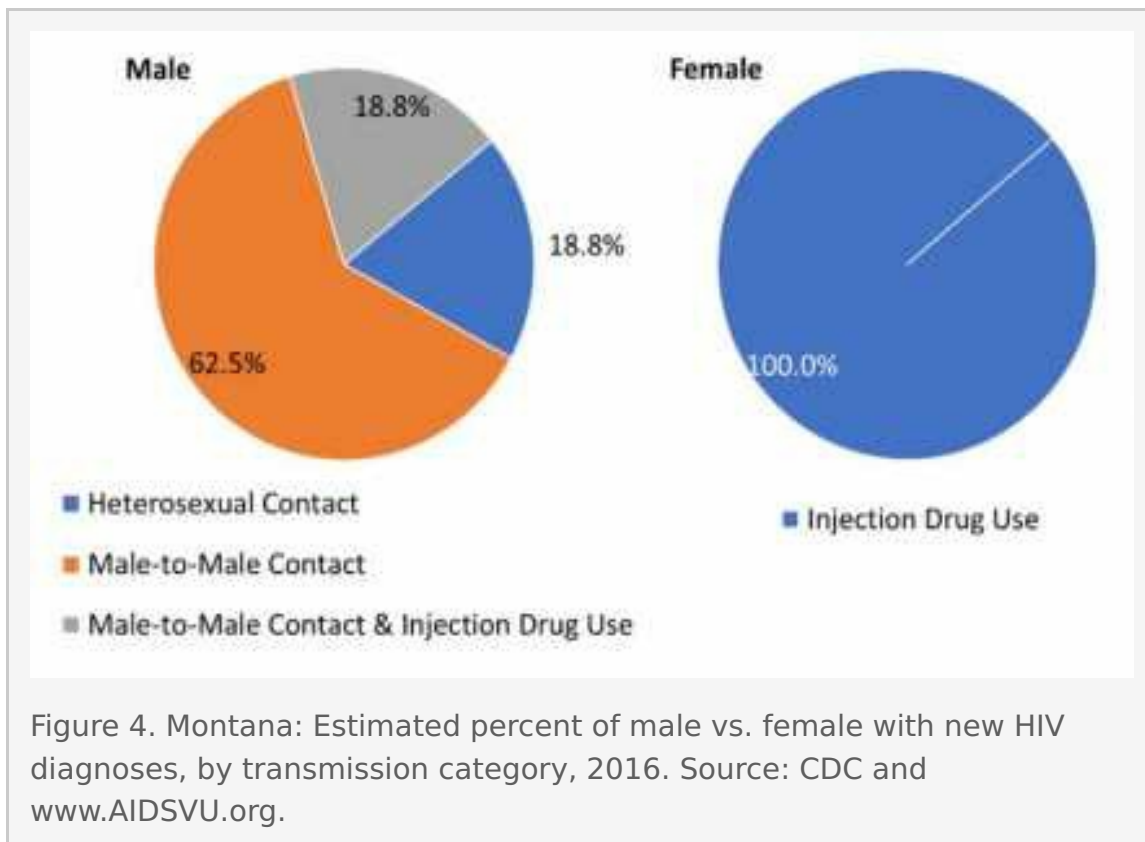


Figure 3. NAS/NOWS Incidence rate and hospital costs for treatment in the United States. Source: T.N.A. Winkelman, et al., 2018.

HIV Prevalence and HIV Diagnoses Attributed to Injection Drug Use (IDU)



- U.S. Incidence:** In 2016, 9 percent (3,480) of the 39,589 new diagnoses of HIV in the United States were attributed to IDU. Among males, 6.3 percent (2,530) of new cases were transmitted via IDU or male-to-male contact and IDU. Among females, 2.3 percent (950) were transmitted via IDU ([CDC](http://www.CDC.gov)).
- U.S. Prevalence:** In 2016, 991,447 Americans were living with a diagnosed HIV infection—a rate of 306.6 cases per 100,000 persons. Among males, 19.9 percent (150,4661) contracted HIV from IDU or male-to-male contact and IDU while 21 percent (50,154) of females were living with HIV attributed to IDU ([CDC](http://www.CDC.gov)).
- State Incidence:** Of the new HIV cases in 2016, 17 occurred in Montana. Among males, 18.8 percent of new HIV cases were attributed to male-to-male contact and IDU. There were no new cases of HIV attributed to IDU among women (Figure 4) ([AIDSVU](http://www.AIDSVU.org)).
- State Prevalence:** In 2015, an estimated 574 persons were living with a diagnosed HIV infection in Montana—a rate of 66 cases per 100,000 persons. Of those, 26.0 percent of cases among males were attributed to IDU or male-to-male contact and IDU. Among

females, 34.1 percent were living with HIV attributed to IDU ([AIDSVu](#)).

Hepatitis C (HCV) Prevalence and HCV Diagnoses Attributed to Injection Drug Use¹

- **U.S. Incidence:** In 2016, there were an estimated 41,200 new cases of acute HCV² ([CDC](#)). Among case reports that contain information about IDU, 68.6 percent indicated use of injection drugs ([CDC](#)).
- **U.S. Prevalence:** An estimated 2.4 million Americans are living with HCV based on 2013-2016 annual averages ([CDC](#)).
- **State Incidence:** There were approximately 20 new cases of acute HCV (1.9 per 100,000 persons) reported in Montana in 2016 ([CDC](#)).
- **State Prevalence:** In Montana, there are an estimated 36,800 persons living with Hepatitis C (2013-2016 annual average), a rate of 900 cases per 100,000 persons ([HepVu](#)).

Additional Resources

- Montana Department of Public Health and Human Services, [Opioid Overdose Prevention](#)
- Centers for Disease Control and Prevention, [Opioid Overdose](#)



NIH RePORTER

FY2018 NIH-funded projects related to opioid use and use disorder in Montana: 0

[Find treatment in Montana \(SAMHSA\)](#)

Notes

1. Not all states collect or report data on the incidence or prevalence of Hepatitis C or on how Hepatitis C is transmitted. When available, the data will be included.
2. Actual acute cases are estimated to be 13.9 times the number of reported cases in any year.