

Injecting in Vain

Americans consume 80 percent of the global opioid supply, while only making up about five percent of the world's population (Manchikanti, 2010). Additionally, nearly 80 percent of heroin users reported using prescription opioids prior to heroin (NIH, 2015; Lankenau, 2012; Jones, 2013; CDC, 2017). Many residents of Southeastern North Carolina have also experienced this opioid 'epidemic' infiltrate their own communities. This project's purpose was to discover whether demographic characteristics such as age, race, gender, marital status, and income may influence where a user initially obtains an opioid.

Methods

We conducted telephone interviews using a systematic random probability sample from a representative phone bank of Southeastern, North Carolina accessed through the Social Science Applied Research Center (SSARC). Chi-square analyses were utilized in order to determine whether demographic characteristics were significant when tested against the initial source of an opioid (N=171).

Results

The demographic composition of this sample consisted of 58 percent females and 42 percent males. Most of the sample was white (83 percent) and most reported their total household income was between \$50,000 and \$99,999 (36 percent). The mean age of the sample was about 54 years old and most respondents were married (60 percent). Out of the 70 percent of the sample who reported use of an opioid, 91 percent initially obtained the opioid through a personal prescription while five percent

turned to illicit sources such as a drug dealer, friend or acquaintance, or a family member's prescription. Demographic characteristics including age, marital status, and income were statistically significant related to the initial procurement of an opioid.

When comparing initial source of an opioid to age, the chi square resulted in a p value of .015 indicating statistical significance. Respondents between the ages of 36 and 71 respondents (94 percent) demonstrated initial obtainment from personal prescriptions and four reported using drug dealers (6 percent). The age group consisting of 72 to 88 year olds only obtained through personal prescriptions (See figure 1). Additionally, income was another nominal variable that resulted in statistical significance ($p=.002$). Almost 40 percent of the sample who reported a total household income of less than \$20,000 procured their first opioid through a drug dealer, and about 93 percent of respondents making over \$20,000 initially obtained an opioid through a personal prescription (See figure 3). Marital status also proved to be statistically significant in regard to the initial obtainment of an opioid ($p=.002$). The majority of respondents that reported the status of married obtained their opioid through a personal prescription (98 percent)(See figure 2).

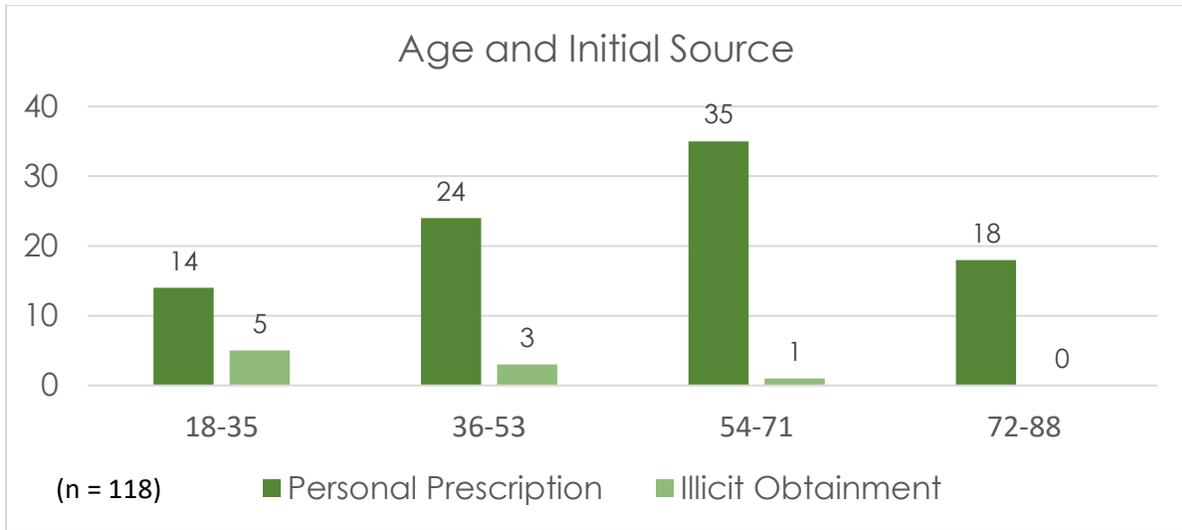


Figure 1 Age and Initial Source

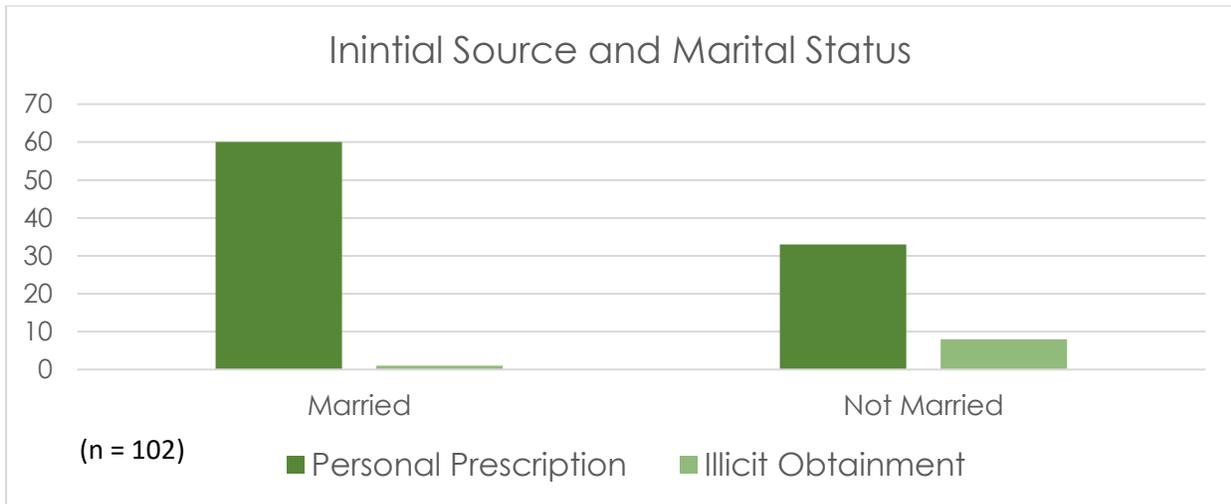


Figure 2 Marital Status and Initial Source

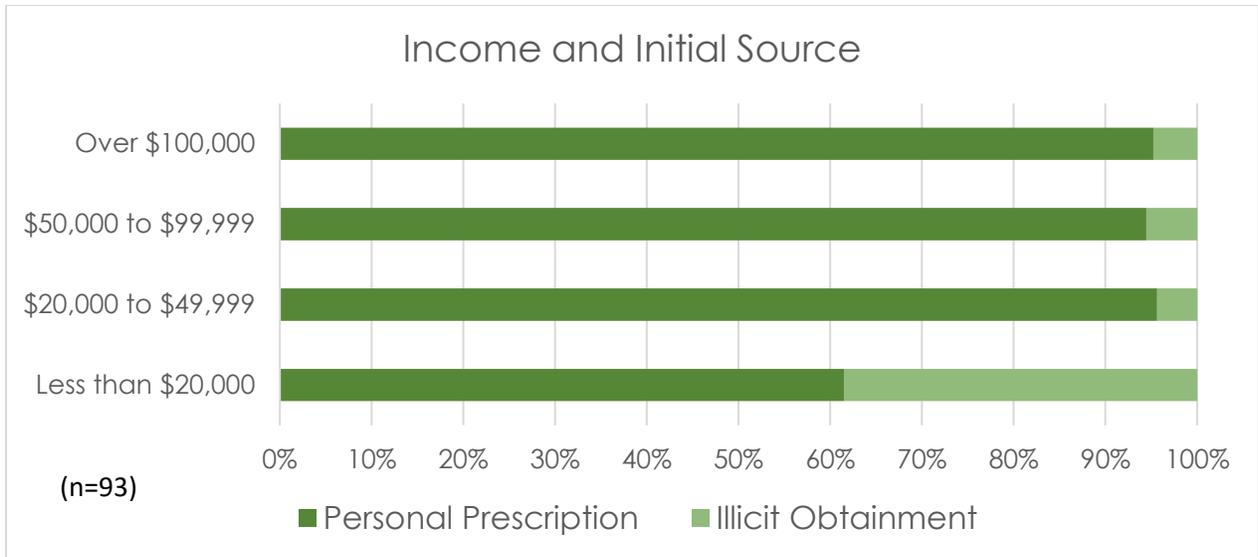


Figure 3 Income and Initial Source

Discussion/Implications

The results indicate that opioid use is very widespread in Southeastern, North Carolina. The data presents that the majority of respondents who had used an opioid initially obtained it through a personal prescription. However age, marital status, and income were demographic characteristics that influenced the initial source of opioids. People who are married, have a total household income of over \$20,000, and are over the age of 53 are statistically significantly more likely to use a personal prescription as their initial source for an opioid. Moreover, those who are not married, have a total household income of less than \$20,000, and are below the age of 53 are also more likely to initially obtain an opioid through a personal prescription. However there are more various illicit sources used like a drug dealer, friend, or family member’s prescription.

References

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