

Connecticut Statewide Opioid Prescription Data from the Connecticut Prescription Monitoring and Reporting System

January 1 – June 30, 2019

Connecticut Prescription Monitoring and Reporting System data

Indicator	Quarter 1, 2019			Quarter 2, 2019		
	Numerator	Denominator	Value	Numerator	Denominator	Value
22a: Rate of opioid analgesics, excluding all buprenorphine products (for MAT and for pain) prescribed per 1,000 residents	472,971	3,588,184	131.81	470,200	3,572,665	131.61
22b: Rate of opioid analgesics, excluding all buprenorphine products (for MAT and for pain) dispensed per 1,000 residents	23,402,669	3,588,184	6,522.15	22,838,931	3,572,665	6,392.69
23: Percent of patients receiving (by prescription and dispensed at a pharmacy) an average daily dose of 90 morphine milligram equivalents (MME) or more of opioid analgesics, across all opioids, excluding all buprenorphine products (for MAT and for pain)	19,527	198,915	9.82%	18,490	195,221	9.47%
25: Among opioid-naïve patients (i.e., patients who have not taken opioid analgesics in 45 days), excluding all buprenorphine products (for MAT and for pain), percent of patients prescribed long-acting/extended-release opioids	2,822	28,612	9.86%	2,702	25,826	10.46%
26: Percent of patient prescription days with overlapping opioid prescriptions, excluding all buprenorphine products (for MAT and for pain)	1,065,202	6,227,396	17.11%	1,017,310	5,997,950	16.96%
27: Percent of patient prescription days with overlapping opioid (excluding all buprenorphine products [for MAT and for pain]), and benzodiazepine prescriptions	1,111,732	6,227,396	17.85%	1,048,001	5,997,950	17.47%

Indicator	First Half 2019		
	Numerator	Denominator	Value
24: Rate of multiple provider episodes (5 or more prescribers and 5 or more pharmacies in a 6 month period) for opioid prescriptions (excluding all buprenorphine products for MAT and for pain) per 100,000 residents	58	3,588,184	1.62



Office of Injury Prevention
Connecticut Department of Public Health
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Note: Data source is the Connecticut Prescription Monitoring and Reporting System

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Linked Connecticut State Unintentional Drug Overdose Reporting System death data and Connecticut Prescription Monitoring and Reporting System data

Indicator	Numerator	Denominator	Value
Percent of decedents who had at least one prescription for a controlled substance since July 1, 2016	431	553	77.94%
Percent of decedents who had at least one opioid prescription in the 30 days preceding death	63	553	11.39%
Percent of decedents who had at least one opioid prescription dispensed to them from a pharmacy in the 180 days preceding death	120	553	21.70%
Percent of decedents who had at least one doctor writing an opioid prescription to them in the 180 days preceding death	120	553	21.70%

Measurement	# of opioid prescriptions per victim in the 30 days preceding death (> 0) n=63	# of doctors writing opioid prescriptions per victim in the 180 days preceding death (> 0) n=120	# of pharmacies dispensing opioid prescriptions per victim in the 180 days preceding death (> 0) n=120
Average	1.63	1.80	1.38
Median	1	1	1
Range	1 to 8	1 to 7	1 to 3

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Indicator Definitions

Indicator 22a: This indicator represents the number of opioid analgesic prescriptions that were prescribed to Connecticut residents within Connecticut during the given time period, per 100,000 Connecticut residents.

Indicator 22b: This indicator represents the number of opioid analgesic prescriptions that were dispensed to Connecticut residents within Connecticut during the given time period, per 100,000 Connecticut residents.

Indicator 23: This indicator represents the percent of Connecticut patients who were prescribed an average dose of 90 morphine milligram equivalents (MME) or more of opioid analgesic drugs per day, among all Connecticut residents who received an opioid analgesic prescription within Connecticut during the given time period.

The CDC recommends to use caution when prescribing opioids at any dosage and prescribe the lowest effective dose, and to avoid or carefully justify increasing dosage to ≥ 90 MME/day. Patients taking or exceeding 90 MMEs per day are at increased risk of unintentional drug overdose.

Indicator 25: This indicator represents the percent of Connecticut patients who were prescribed at least one long-acting/extended release opioid who had not been dispensed an opioid prescription in the previous 45 days, among all Connecticut residents who received a long-acting/extended release opioid prescription within Connecticut during the given time period.

Extended-release and long-acting opioids, which are available by prescription and come in several forms—pills, liquids, skin patches—often contain higher doses of medication than immediate-release opioids and opioid/non-opioid combination drugs. Because these medications can pose significant risks and safety concerns, new label requirements will stress that other treatment options should be considered before ER/LA opioid drugs. (<http://www.healthcommunities.com/chronic-pain/extended-release-long-acting-opioids-fda.shtml>)

Indicator 26: This indicator represents the percent of days during which Connecticut patients had more than one prescribed opioid prescription, among the sum of all prescribed opioid days for Connecticut residents within Connecticut in the given time period.

Indicator 27: This indicator represents the percent of days during which Connecticut patients had at least one opioid and at least one benzodiazepine prescription on the same day, among the sum of all prescribed opioid days for Connecticut residents within Connecticut in the given time period.

Indicator 24: This indicator represents the number of Connecticut patients receiving prescriptions for opioid analgesics from five or more prescribers dispensed at five or more pharmacies in a six-month period within Connecticut during the given time period, per 100,000 Connecticut residents.



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