



Use of Illegal Substances and Non-Medical Use of Prescription Drugs

The use of illegal substances such as marijuana, heroin, cocaine and related substances has long been a concern of Livingston County residents. In addition, a recent trend has emerged characterized by the non-medical use of prescription drugs, which has been identified as a national and statewide epidemic.

This issue will examine the use of selected substances recorded in the 2015 Livingston Community Health Status Assessment as well as the non-medical use of prescription drugs.

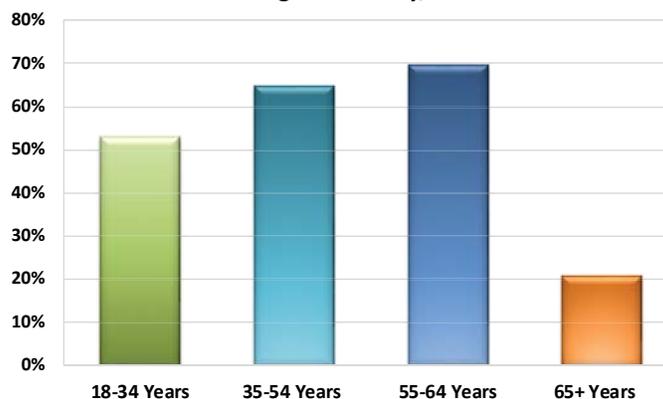
Marijuana

Over one-half of adult Livingston County residents, 54.7%, reported using marijuana at least once in their lifetime. This is equivalent to 73,500 residents. It was noted that two percent (2%) reported they currently have a prescription for marijuana.

Lifetime marijuana use varies by gender and age. A higher percentage of males have reported use of marijuana at 69.9%, than females at 46.8%. Residents ages 55-64 reported the highest lifetime use at 69.4%, followed by residents ages 35- 54 at 64.6%, residents ages 18-34 at 52.9%, and residents ages 65+ at 20.7%.

Among those who reported ever smoking marijuana, 21.7% (30,140 residents) reported smoking marijuana in the past year and approximately 3.0% (4,170 residents) reported smoking marijuana in the past month.

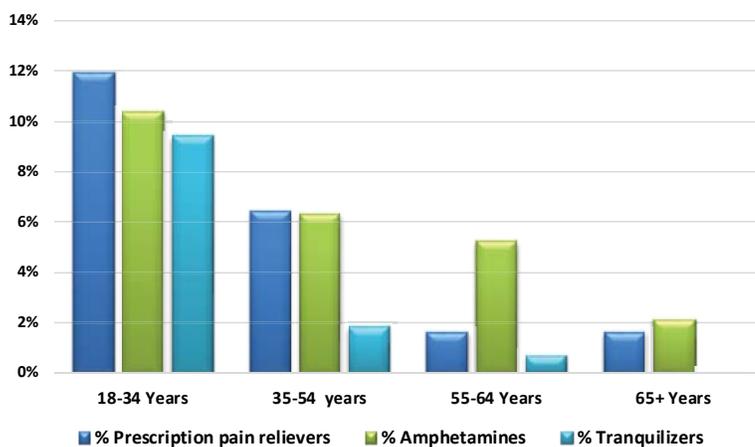
Percent Ever Used Marijuana in Lifetime, Livingston County, 2014



Heroin

Heroin use among Livingston residents was reported at a very low level with less than 1% of respondents reported ever having used heroin.

Percentage Drug Use By Type and Age, Livingston County 2014



Abuse Of Prescription Pain Relievers (Vicodin, Percocet, Oxycontin, Darvocet, Darvon and Tylenol with Codeine)

Nearly 6% of Livingston residents (8,350 residents) reported using a prescription pain reliever to get high. There was significant variation in non-medical use of pain relievers by age. Residents 18-34 at 12% were nearly twice as likely to use their drugs to get high compared to those ages 35-54 at 6.4%.

Non-medical use of prescription pain relievers did not vary significantly by gender or income among Livingston residents.





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Abuse of Amphetamines and Stimulants (Methamphetamine, Dejoxy, Methadrine, Ritalin, Adderall, Concerta)

Amphetamines and other stimulants are often taken to stay awake, lose weight, and to treat attention deficit disorders. Slightly over 7.0% of Livingston adult residents (9,725 residents) reported having ever used amphetamines to get high. Males at 9.9% were nearly three times more likely than females at 3.9% to use amphetamines to get high.

Over three out of four residents (76%) reported that their original use of amphetamines was prescribed. However, in the year before the survey, of those who ever used amphetamines to get high, 41% reported using amphetamines to get high.

Abuse of Tranquilizers (Klonopin, Clonazepam, Xanax, Alprazolam, Aivan, Lorazepam, Valium, Diazepam)

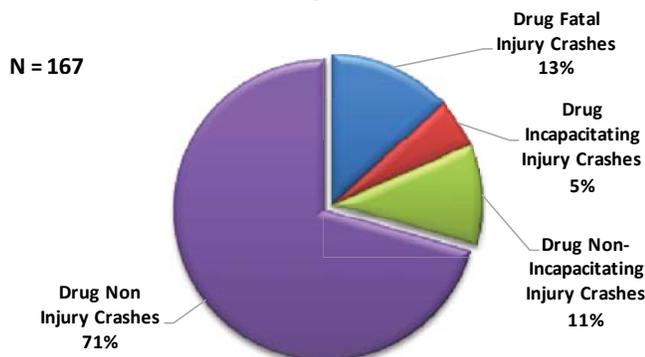
Lifetime use of tranquilizers to get high was reported by 3.0% of the population (4,035). The reported use of tranquilizers to get high was highest among the 18-34 age group at 9.4%.

Drugs and Driving

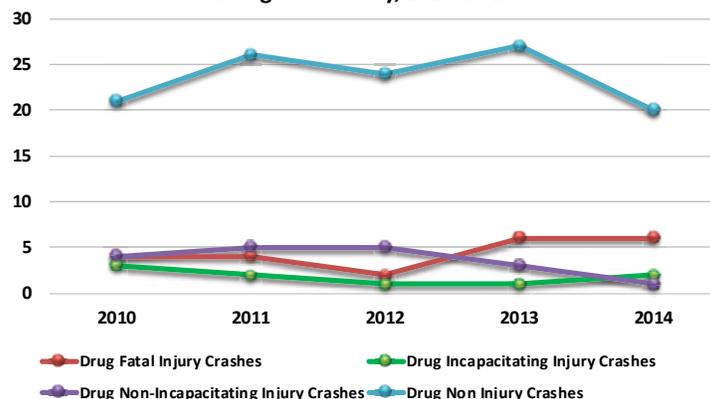
Driving a vehicle or operating other machinery while high on drugs can have severe negative consequences. Since 2010, drug use has been recorded following 167 crashes in Livingston County. While drug related crashes represented less than one percent (1%) of all crashes between 2010 and 2014, drugs were recorded in 28% of all fatal crashes (22 of 79 fatal crashes).

Year	Total Drug Crashes	Total Drug Fatal Crashes	Total Incompacitating Injury Drug Crashes	Total Non-Incompacitating Injury Drug Crashes	Total Non-Injury Drug Crashes
2010	32	4	3	4	21
2011	37	4	2	5	26
2012	32	2	1	5	24
2013	37	6	1	3	27
2014	29	6	2	1	21
TOTAL	167	22	9	17	119

5-Year Total Crashes Involving Drugs, Livingston County 2010-2014



5-Year Trend - Crashes Involving Drugs, By Injury Type Livingston County, 2010-2014





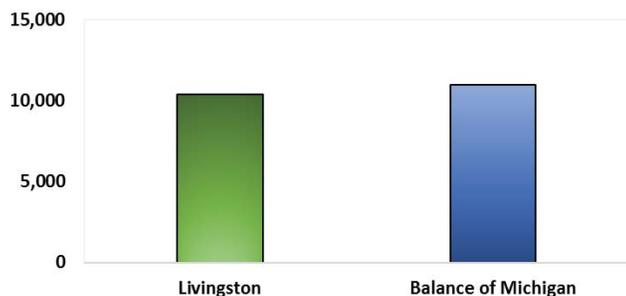
Use of Illegal Substances and Non-Medical Use of Prescription Drugs

Addressing the misuse or abuse of prescription pain killers and other potent drugs is a national and statewide priority. Since 2003, the State of Michigan, through the Michigan Automated Prescription System (MAPS), has been monitoring prescription drug distribution as part of a nation-wide network of similar registries. In Michigan, all pharmacies, dispensing practitioners and veterinarians who dispense controlled substances in Schedules II-V are required to electronically report this prescription data to MAPS on a daily basis.

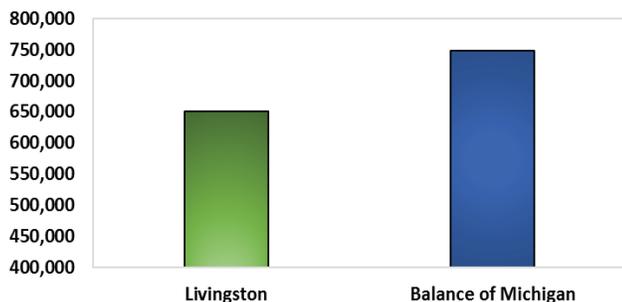
Prescription drugs of the highest concern are those included in the Drug Enforcement Administration Controlled Substances List-Schedule II. Schedule II drugs, substances, or chemicals are defined as drugs with a high potential for abuse.

Examples of Schedule II narcotics include: hydromorphone (Dilaudid®), methadone (Dolophine®), meperidine (Demerol®), oxycodone (OxyContin®, Percocet®), fentanyl (Sublimaze®, Duragesic®), morphine, opium, codeine, and hydrocodone. Examples of Schedule IIN stimulants include: amphetamine (Dexedrine®, Adderall®), methamphetamine (Desoxyn®), and methylphenidate (Ritalin®). Other Schedule II substances include: amobarbital, glutethimide, and pentobarbital.

Schedule II Prescriptions per 10,000 Population, Livingston County, 2014



Schedule II Doses per 10,000 Population, Livingston County, 2014



We have examined the MAPS data for the distribution of Schedule II prescriptions and doses for Livingston County residents. During 2014, there were 180,643 prescriptions and 11,757,949 doses of Schedule II drugs recorded for Livingston County residents. In order to compare this to the rest of the state we calculated a population based rate of 10,387 prescriptions per 10,000 residents, or slightly over one prescription for every resident of the county. Likewise, there were 650,870 doses per 10,000 residents or 65 doses per resident. The Livingston County rate of prescription was slightly lower than the balance of Michigan, which at 10,976 per 10,000 residents equates to nearly 1.1 prescriptions for every resident of the balance of the state. The number of doses prescribed to Livingston County was significantly lower than the balance of Michigan, which at 748,445 per 10,000 residents is nearly 75 doses per resident in 2014.

If you would like more information or to leave feedback, please visit: <https://www.surveymonkey.com/r/LivHealthFeedback>

Sources: 2014 Livingston County Behavioral Risk Factor Survey; Michigan Department of Licensing and Regulatory Affairs, MAPS, 2014; Michigan Traffic Crash Facts, 2014; U.S. Dept. of Justice, Drug Enforcement Administration - List of Controlled Substances

Provided By: Livingston County Department of Public Health

Prepared By: Center for Population Health, Southeastern Michigan Health Association

