

Research Report

Revised February 2018

Where can I get further information about steroids?

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NIDA's website includes:

- Information on drugs of use and misuse and related health consequences
- NIDA publications, news, and events
- Resources for health care professionals, educators, and patients and families
- Information on NIDA research studies and clinical trials
- Funding information (including program announcements and deadlines)
- International activities
- Links to related websites (access to websites of many other organizations in the field)
- Information in Spanish (en español)

NIDA websites and webpages

- nida.nih.gov/publications/drugfacts/anabolic-steroids
- nida.nih.gov/drugs-abuse/steroids-anabolic
- researchstudies.drugabuse.gov
- irp.drugabuse.gov

For physician information

- NIDAMED: nida.nih.gov/nidamed

Other websites

Information on the abuse of Steroids and other Appearance and Performance Enhancing Drugs (APEDs) is also available through the following websites:

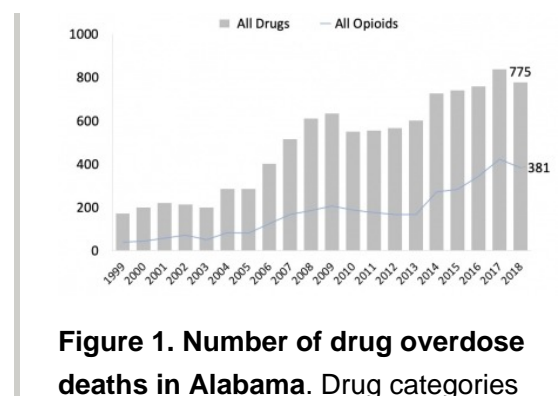
- [Monitoring the Future](#)
- [The Partnership for Drug-Free Kids](#)

- [World Anti-Doping Agency](#)
- [Labeling information from the FDA: Testosterone labeling](#)
- [Labeling information from the FDA: Tainted Products Marketed as Dietary Supplements](#)
- [Steroid prevention programs for high school athletes: Athletes Training & Learning to Avoid Steroids \(ATLAS\)](#)
- [Steroid prevention programs for high school athletes: Athletes Targeting Healthy Exercise & Nutrition Alternatives \(ATHENA\)](#)

Drug-Involved Overdose Deaths

In the U.S., there were 67,367 drug overdose deaths reported in 2018, 4.1% fewer deaths than in 2017.

- The age-adjusted rate declined by 4.6% to 20.7 per 100,000 standard population.¹ The decline follows an increasing trend in the rate from 6.1 in 1999 to 21.7 in 2017.
- Opioids were involved in 46,802 (a rate of 14.6) overdose deaths in 2018—nearly 70% of all overdose deaths.
- Deaths involving synthetic opioids other than methadone (including fentanyl and fentanyl analogs) continued to rise with more than 28,400 (a rate of 9.9) overdose deaths in 2018.
- The number of deaths involving prescription opioids declined to 14,975 (a rate of 4.6) in 2018 and those involving heroin dropped to 14,996 (a rate of 4.7).²



Nearly half of the 775 reported drug overdose deaths in Alabama involved opioids in 2018—a total of 381 fatalities (and a rate of 8.3) (Figure 1).

presented are not mutually exclusive, and deaths may have involved more than one substance. Source: CDC WONDER.

- Overdose deaths involving specific opioids are not available for the state because the data reported did not meet inclusion criteria.³

Opioid Prescriptions

In 2018, Alabama providers wrote 97.5 opioid prescriptions for every 100 persons. This was the highest prescribing rate in the country and almost twofold greater than the average U.S. rate of 51.4.⁴

Neonatal Abstinence Syndrome (NAS)/Neonatal Opioid Withdrawal Syndrome (NOWS)

NAS or NOWS may occur when a woman uses opioids during pregnancy. To date, there is no standard in NAS/NOWS provider and hospital coding practices. As a result, there is variability in the rates reported by states.⁵

- The national incidence rate of NAS/NOWS in 2016 was 7 cases per 1,000 hospital births.⁶⁻⁷
- The highest rates were reported among American Indian/Alaska Native (15.9 per 1,000 births) and White Non-Hispanic (10.5 per 1,000 births) individuals.
- In 2016, hospital costs for NAS/NOWS births totaled \$572.7 million, after adjusting for inflation.⁸
- State specific data on the rate of babies born with NAS/NOWS in Alabama is unavailable.⁶⁻⁷

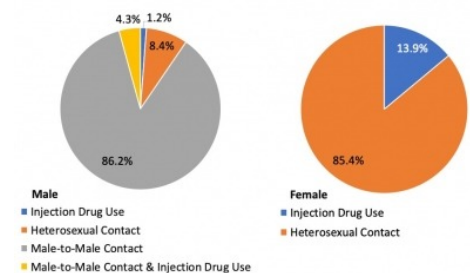


Figure 2. Alabama: Estimated percent of male vs. female with new

New HIV Diagnoses⁹ and Prevalence Attributed to Injection Drug Use (IDU)

HIV diagnoses, by transmission category, 2017. Centers for Disease Control and Prevention (CDC). NCHHSTP AtlasPlus.

- **U.S. New Diagnoses:** In 2017, 9.7% (3,690) of the 38,226 new HIV diagnoses were attributed to IDU. Among males, 8.6% (2,655) of new diagnoses were transmitted via IDU or male-to-male sexual contact and IDU. Among females, 14.2% (1,035) of new diagnoses were transmitted via IDU.¹⁰
- **U.S. Prevalence:** In 2017, more than 1 million Americans were living with a diagnosed HIV infection—a rate of 367.7. Among males, 16.4% (125,274) contracted HIV from IDU or male-to-male sexual contact and IDU. Among females, 20.8% (49,288) were living with HIV attributed to IDU.¹⁰
- **State New Diagnoses:** Of the new HIV diagnoses in 2017, 651 occurred in Alabama—a rate of 15.9. Among males, 5.5% of new HIV diagnoses were attributed to IDU or male-to-male sexual contact and IDU. Among females, 13.9% were attributed to IDU (Figure 2).¹⁰
- **State Prevalence:** In 2017, 13,124 persons were living with a diagnosed HIV infection in Alabama—a rate of 320.5. Of those, 11.7% of male cases were attributed to IDU or male-to-male sexual contact and IDU. Among females, 14.1% were living with HIV attributed to IDU.¹⁰

Hepatitis C (HCV) Incidence and Prevalence Attributed to IDU¹¹

- **U.S. Incidence:** In 2017, there were an estimated 44,700 new cases of acute HCV. Among case reports that contained information about IDU, 86.6% indicated IDU prior to onset of acute, symptomatic HCV.¹²
- **U.S. Prevalence:** An estimated 2.4 million Americans are living with HCV (based on 2013-2016 annual average).¹²
- **State Incidence:** There were approximately 17 new cases of acute HCV (a rate of 0.3) reported in Alabama in 2017.¹⁰
- **State Prevalence:** In Alabama, there are an estimated 30,700 persons living with HCV (a rate of 820 based on 2013-2016 annual average).¹³

References

1. Rates are age-adjusted per 100,000 standard population unless otherwise noted.

2. Hedegaard H, Miniño AM, Warner M. Drug overdose deaths in the United States, 1999–2018. NCHS Data Brief, no 356. Hyattsville, MD: National Center for Health Statistics. 2020.
3. Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2018 on CDC WONDER Online Database released in 2020. Data are from the Multiple Cause of Death Files, 1999-2018, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. (2020 February 14) Retrieved from <http://wonder.cdc.gov/mcd-icd10.html>
4. Centers for Disease Control and Prevention. U.S. Opioid Prescribing Rate Maps. (2019, October 3). Retrieved from <https://www.cdc.gov/drugoverdose/maps/rxrate-maps.html>
5. Lind JN, Ailes EC, Alter CC, et al. Leveraging Existing Birth Defects Surveillance Infrastructure to Build Neonatal Abstinence Syndrome Surveillance Systems—Illinois, New Mexico, and Vermont, 2015–2016. MMWR Morb Mortal Wkly Rep 2019;68:177–180.
6. Healthcare Cost and Utilization Project (HCUP). Neonatal Abstinence Syndrome (NAS) Among Newborn Hospitalizations. (2019, December 12) Retrieved from <https://www.hcup-us.ahrq.gov/faststats/nas/nasquery.jsp?>
7. Comparisons with earlier estimates are difficult because of the ICD-10-CM transition in 2015.
8. Strahan AE, Guy Jr. GP, Bohm M, et al. Neonatal Abstinence Syndrome Incidence and Health Care Costs in the United States, 2016. JAMA Pediatrics. 2020;174(2):200-202.
9. The term refers to people diagnosed with HIV infection, regardless of the stage of disease at diagnosis.
10. Centers for Disease Control and Prevention. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) AtlasPlus. (2020, January 30). Retrieved from <https://gis.cdc.gov/grasp/nchhstpatlas/main.html>.
11. 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.
12. Centers for Disease Control and Prevention. Surveillance for Viral Hepatitis—United States, 2017. 2019, November 14. Retrieved from <https://www.cdc.gov/hepatitis/statistics/2017surveillance/index.htm>
13. HepVu. Local Data: Alabama. Retrieved from <https://hepvu.org/state/Alabama/>

April 3, 2020