# NEW HAMPSHIRE



### Opioid-Related Overdose Deaths

New Hampshire has the second highest rate of opioid-related overdose deaths in the country. In 2016, there were 437 opioid-related overdose deaths—a rate of 35.8 deaths per 100,000 persons—nearly 3 times higher than the national rate of 13.3 deaths per 100,000. From 2013 through 2016, opioid-related deaths in New Hampshire tripled. This increase was mainly driven by the number of deaths related to synthetic opioids (predominately fentanyl), which increased more than tenfold, from 30 to 363 deaths, during this time.

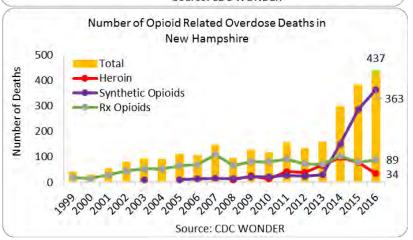
### Opioid Pain Reliever Prescriptions

In 2015, New Hampshire providers wrote 66.6 opioid prescriptions per 100 persons (886,000 prescriptions). In the same year, the average U.S. rate was 70 opioid prescriptions per 100 persons (IMS Health, 2016).

## Neonatal Abstinence Syndrome (NAS)

A CDC study analyzing 2013 NAS data available across 28 states estimated the national average NAS rate at 0.6 percent of

Rate of Opioid Related Overdose Deaths in New Hampshire 35.8 per 40 New Hampshire 313 35 Deaths, Age Adjusted Rate 30 100,000 Persons 25 3.1 <sub>2.2</sub> 4.1 6.3 7 6.9 8.2 7.9 7 9.5 8.9 11.5<sub>10.5</sub>11 20 15 10 Source: CDC WONDER



live births (<u>CDC, MMWR, 2014</u>). NAS in New Hampshire increased dramatically from 2003 through 2011—from 20 cases in 2003 to nearly 150 in 2011 (<u>NH DHHS</u>). By 2015 this number rose to 269 infants (a rate of 24.4 of 1,000 live births) diagnosed with NAS (<u>K. Smith, Carsey Research Regional Brief #51, University of NH</u>).

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

<u>U.S. Incidence:</u> In 2015, 9.1 percent (3,594<sup>1</sup>) of the 39,513 new diagnoses of HIV in the United States were attributed to IDU. Among new cases, 8.2 percent (2,614<sup>1</sup>) of cases among men and 13.2 percent (980) of cases among women were transmitted via IDU (<u>CDC</u>).

<u>U.S. Prevalence:</u> In 2014, 955,081 Americans were living with a diagnosed HIV infection—a rate of 299.5 per 100,000 persons. Of these, 18.1 percent (131,056<sup>1</sup>) of males and 22.6 percent (52,013) of females were living with HIV attributed to IDU (<u>CDC</u>).

<sup>&</sup>lt;sup>1</sup> Includes transmission to individuals with injection drug use as a risk factor.



<u>State Incidence</u>: Of the new HIV cases in 2015, 22 occurred in New Hampshire (no transmission data available for New Hampshire) (<u>AIDSVu</u>).

<u>State Prevalence</u>: In 2014, an estimated 1,240 persons were living with a diagnosed HIV infection in New Hampshire—a rate of 108 infections per 100,000 persons (<u>AIDSVu</u>). As of 2013, 12.4 percent of these persons were living with HIV per AIDS attributed to IDU (<u>NH.gov</u>).

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

<u>U.S. Incidence</u>: In 2015, there were 181,871 reported cases of chronic HCV and 33,900 estimated cases of acute HCV<sup>2</sup> (<u>CDC</u>). Where data were available, 64.2 percent of acute cases reported IDU (<u>CDC</u>). <u>U.S. Prevalence</u>: An estimated 3.5 million Americans are living with HCV, including approximately 2.7 million living with chronic infections (<u>CDC</u>).

<u>State Incidence</u>: State incidence data are not available for 2016 and all previous years. As of June 2017, New Hampshire collected 113 reports of chronic HCV and 10 reports of acute HCV for 2017 (<u>NH.gov</u>). <u>State Prevalence</u>: Current state prevalence data are not available. As of 2010, an estimated 11,000 persons (1,070 cases per 100,000 persons) were living with HCV in New Hampshire (<u>HepVu</u>).

#### Additional Resources

- New Hampshire Department of Health and Human Services, <u>The Opiate/Opioid Public Health Crisis:</u> <u>Update on the State of New Hampshire's Comprehensive Response</u>
- Centers for Disease Control and Prevention, Opioid Overdose
- Centers for Disease Control and Prevention, <u>Annual Surveillance Report of Drug-Related Risks and Outcomes</u> (2017)
- Substance Abuse and Mental Health Services Administration, <u>Behavioral Health Barometer New Hampshire</u>, Volume 4 (2017)

<sup>&</sup>lt;sup>2</sup> 2015 estimate after adjusting for under-ascertainment and under-reporting. Data for 2015 were unavailable for Alaska, Arizona, Connecticut, the District of Columbia, Hawaii, Iowa, Mississippi, New Hampshire, Rhode Island, and Wyoming.