

7.4%

Percentage of young adults (18–25) who are dependent on or users of illicit drugs—by far the highest of any age group.

Substance Abuse and Mental Health Services Administration. (2015). *Behavioral health barometer: United States, 2014* (HHS Publication No. SMA-15-4895, p. 14). Rockville, MD: Author.

REACHING THE MOST VULNERABLE

Although opioid use is widespread, specific groups face a particularly high risk. RTI is conducting research involving several of these groups, including patients with chronic pain, people who inject drugs, patients with psychiatric disorders, users of other illicit drugs, and Operation Enduring Freedom/Operation Iraqi Freedom veterans.

Key Research Activities

- Investigating the clinical epidemiology of opioid prescribing practices
- Analyzing risk factors for opioid use
- Exploring physicians' decision making regarding opioids for chronic pain
- Examining the increased availability and use of illicitly made fentanyl and implications for overdose prevention
- Identifying and developing effective interventions for vulnerable communities at increased risk for injection-related HIV outbreaks
- Developing surveillance systems that can capture drug-related health risks in near-real time and alert community stakeholders for targeted and timely interventions



COMMUNICATING EFFECTIVELY TO PREVENT USE

One of the keys to prevention is effective communication—developing messages that help at-risk populations make better decisions about the risks, benefits, and uncertainties of using opioids. This requires a deep understanding of the intended audience, and the types of messages to which they respond, to promote informed decision making. RTI researchers have been developing and evaluating social marketing and public health communications programs for the past 2 decades.

Key Research Activities

- Conducting qualitative and survey research with consumers, patients, and health care providers
- Designing and implementing intervention campaigns
- Evaluating communications programs

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RTI International is an independent, nonprofit research institute dedicated to improving the human condition. Clients rely on us to answer questions that demand an objective and multidisciplinary approach—one that integrates expertise across the social and laboratory sciences, engineering, and international development. We believe in the promise of science, and we are inspired every day to deliver on that promise for the good of people, communities, and businesses around the world.

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OPIOIDS IN AMERICA

A complex crisis.
A comprehensive response.



Addressing opioid misuse is a tremendous challenge that must be faced on multiple fronts: treatment, prevention, pain management, public health communication and education, and more. RTI International is uniquely equipped to support every one of these efforts—for decades, we've been putting the power of science and experience up against our country's most serious behavioral health problems. Today, we're gathering key data, conducting essential research, and helping policymakers implement informed decisions—based on sound science—for the public good.

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28,000

Number of Americans who died from using opioids, including prescription opiate pain relievers and heroin, in 2014.

Centers for Disease Control and Prevention. (2015). Increases in drug and opioid overdose deaths—United States, 2000–2014. *MMWR*, 64, 1–5.

EXPLORING WAYS TO SAVE LIVES

The United States is experiencing an opioid overdose epidemic. More people now die from opioid overdoses than from automobile accidents. RTI has been conducting research related to opioid overdoses for decades.

Key Research Activities

- Determining the geographic and demographic scope of the opioid overdose problem
- Developing and evaluating programs, including the geographic scope of naloxone programs and interventions
- Conducting implementation science studies to understand how to implement prevention programs for those with the highest needs, including people exiting incarceration
- Determining whether overdose-related laws and regulations are associated with reductions in overdose deaths



MAXIMIZING OUR LIMITED RESOURCES

Facing the increasing need for opioid addiction treatment with limited resources puts policymakers, funders, and providers in the difficult position of having to choose among alternative treatment options. Economic analyses provide critical information on the value of alternative treatments. RTI has an extensive history of performing such evaluations.

Key Research Activities

- Carrying out economic evaluations
- Evaluating costs and cost-effectiveness
- Conducting cost-benefit analyses
- Exploring the impact of treatment on economic outcomes
- Determining costs and benefits of supervised injection facilities in the United States

INVESTIGATING THE CUTTING EDGE

RTI is studying methods of limiting disease transmission in high-risk populations (in particular, people who inject drugs) through research into the use of “dead-space” syringes and the availability of supervised injection facilities for habitual users. RTI is also working to uncover innovative solutions to managing chronic pain.

Key Research Activities

- Understanding how laws and regulations are associated with reducing overdose deaths
- Studying people who inject drugs
- Investigating HIV/HCV epidemiology and prevention and associations with drug use
- Analyzing substance use treatment readiness
- Conducting personalized treatment analysis
- Developing simulation modeling of policy impact
- Building integrated models of care, including primary care, within opioid treatment programs

STOPPING ADDICTION BEFORE IT STARTS

One of the most important responses to the current crisis is to limit future spread by keeping people—particularly adolescents and young adults—from becoming addicted in the first place.

Key Research Activities

- Determining effective combinations of preventive interventions for prescription opioid misuse
- Analyzing National Poisoning Data System calls to assess the impact of prevention strategies
- Evaluating the impact of first responders to reduce opioid deaths

1,000x

The amount of blood left in a high dead-space syringe is 1,000 times greater than in low dead-space syringes—so the use of the latter drastically reduces the likelihood of transmitting HIV and hepatitis among people who inject drugs.

Zule, W. A., Cross, H. E., Stover, J., & Pretorius, C. (2013). Low dead space syringes: Authors' response. *International Journal of Drug Policy*, 24(1), 21–22.

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On average, among people who inject opioids, those who also use marijuana inject drugs 18 fewer times a month than those who do not use marijuana.

Kral, A. H., Wenger, L., Novak, S. P., Chu, D., Corsi, K. F., Coffa, D., Shapiro, B., & Bluthenthal, R. N. (2015). Is cannabis use associated with less opioid use among people who inject drugs? *Drug and Alcohol Dependence*, 153, 236–241.