



Delaware Drug and Alcohol Tracking Alliance (DDATA)



Gap Report 4 for Continuation Year

Substance Use, Misuse, and Abuse among Older Delawareans

June 2015

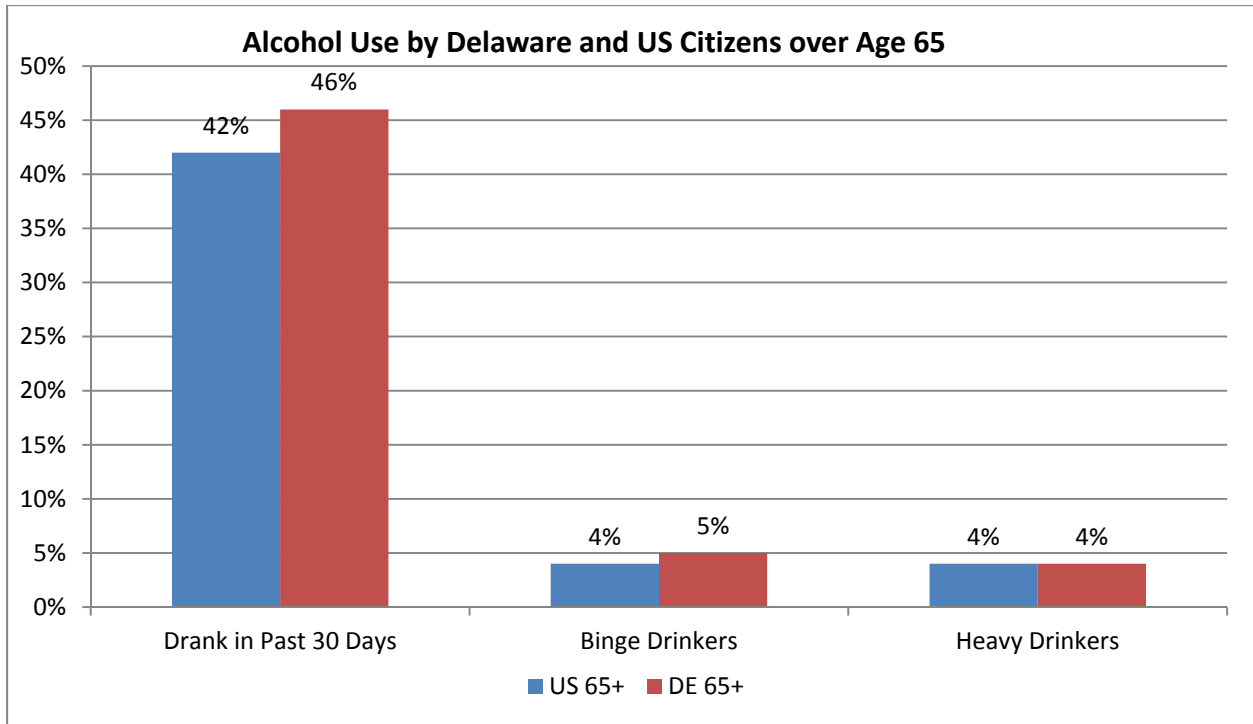
The Delaware Drug and Alcohol Tracking Alliance (DDATA) is charged with providing a quarterly assessment of gaps in services and programs for Delaware residents across the lifespan. This Gap Report considers the topic of substance use, misuse, and abuse among older Delawareans and special considerations relevant to this growing segment of the population.

Demographics

In recent years, Delaware has become a retirement destination for a variety of reasons. According to Census Bureau data, Delawareans aged 65 and older represent 15.9% of the state's total population (U.S. Census Bureau, 2013). By the year 2030 that rate is expected to nearly double; the Delaware Population Consortium projects that almost a quarter of a million Delaware residents (29% of the overall population) will be aged 65 and over (Delaware Population Consortium, 2014). Older individuals are more likely to report having one or more disabilities; 32% of older Delawareans report having at least one disability, and one in five report having a mobility disability (AGing Integrated Database, 2015).

What is Known About Rates of Substance Use, Misuse, and Abuse among Older Delawareans

There is not a great deal of state-specific data available on rates of substance use, misuse, and abuse by older residents. According to the 2013 Behavioral Risk Factor Surveillance System (BRFSS, an annual survey conducted by the U.S. Center for Disease Control and Prevention in all 50 states and the District of Columbia), older Delawareans report higher rates of alcohol consumption across all measures when compared to national rates. As the chart indicates, there is a significantly higher percentage (46%) of the Delaware population aged 65 and over who self-identify as current drinkers (having had a drink in the past 30 days) than the national rate (42%). Though not statistically significant, the rate of binge drinking (defined as men having five or more drinks on one occasion or women having four or more drinks on one occasion in the past 30 days) and heavy drinking (men having more than two drinks per day and women having more than one drink per day) are slightly higher than national percentages.



In 2014, individuals aged 51 and older comprised 7.9% of total admissions, or 629 of 7,957 admissions to substance abuse treatment facilities that are certified or licensed by Delaware Division of Substance Abuse and Mental Health (U.S. Substance Abuse and Mental Health Services Administration, 2015).

Throughout the U.S., older individuals (aged 65 and up) account for more than one-third of outpatient prescription drug spending (National Institute on Drug Abuse, 2014). Data reported through the Delaware Prescription Monitoring Program (DPMP) indicates that in 2013, patients aged 65 and older were prescribed opioids (such as Vicodin, Percocet, OxyContin, typically used for pain management) at a rate of 948.17 per 1,000 residents and were prescribed benzodiazepines (such as Xanax and Valium, commonly used for anxiety) at a rate of 428.17 per 1,000 (Brandeis University, 2014). While the prescription rate is not a proxy for prescription drug abuse, it creates the potential for misuse, abuse, and drug interactions with other medications, over-the-counter substances, and alcohol. Unused medications also provide opportunity for illicit use by persons other than for whom it was prescribed, including youth.

Specialized Treatment Services for the Older Adult Population

The 2015 Guide to Services for Older Delawareans and Persons with Disabilities does not list any specialized substance abuse treatment resources designed for this population (Delaware Health and Social Services, 2015). DSAMH provides services for adults aged 18 and over and does not categorize services that are customized for older adults.

Why This Population Merits Special Consideration

At a first glance it appears that substance abuse does not pose a significant threat to older Delawareans. However, there are several factors that escalate the seriousness of this threat and its potential for negative consequences.

Due to physiological changes that occur as we age, older adults are likely to experience a greater impact by the same amount of alcohol consumed when compared to younger adults. At any given level of consumption, an older adult will experience a higher level of blood alcohol content (BAC) and, in turn, a higher degree of impairment (Barry, 2015). Because alcohol is metabolized more slowly as we age it remains in the body longer (SAMHSA, 2012) which means its effect also lasts longer.

Older adults are more likely to experience chronic health conditions such as cardiac, vascular, and neurological disorders that can be exacerbated by alcohol and other substance use. Potential interaction between alcohol and other substances, health conditions, and other prescription medications can create adverse and potentially life-threatening consequences. Substance misuse and abuse also negatively affects aspects of mental and cognitive health, including mood, concentration, judgment, impulsivity, and psychotic features (Blow & Barry, 2014; Reifman & Welte, 2001), which may lead to other risky behavior. Prolonged benzodiazepine use has also been associated with cognitive decline among older individuals (Billioti de Gage, S., Moride, Y., Ducruet, T. et al., 2014).

Despite these physiological changes, surveys such as the BRFSS do not define lower thresholds of consumption when measuring binge and heavy drinking among older individuals. Therefore, the little data available on substance use among older adults likely underestimates its prevalence. This is further complicated by the fact that many survey instruments that gather data on older adults tend to generically categorize seniors as “age 65 and older.” This fails to take into account physiological differences – and their consequences in terms of substance use – that *continue* to occur throughout the lifespan as more people live decades beyond age 65. Given the trend of increasing life expectancy it will become even more challenging to measure the significance of substance use rates in a meaningful way for the oldest adults.

Prescription drug abuse has been labeled a national epidemic and a top priority for public health agencies (Office of National Drug Control Policy, n.d.). Based on 2013 data, an older adult in Delaware is given 1.3 prescriptions for opioids and/or benzodiazepines each year, providing a cache of medication that can be given, “borrowed,” or stolen by others. Given that many older Delawareans live with other family members and even take on custodial roles, this creates easy access to drugs and opportunity for abuse by youth.

Substance abuse by older individuals has also been associated with increased risk for elder abuse, including self-neglect and financial exploitation (Jargin, 2014; Friedman et al., 2011; Shugarman, et al., 2003; Choi & Mayer, 2000), and may also be related to past or current trauma (Osgood & Manetta, 2002).

In addition to a lack of specialized substance abuse treatment services designed for older Delawareans, a lack of transportation may limit access to self-help and other support services (Merriman-Nai & Kuna, 2011).

Conclusions

- There is little available data on substance use, misuse, and abuse among older Delawareans and what information is available may underestimate both the prevalence of the issue and the magnitude of its impact.
- Substance use affects older individuals differently than younger individuals due to physiological changes, and is associated with increased potential for adverse health outcomes.
- Substance abuse among older individuals is associated with higher risk for elder abuse, self-neglect, and financial exploitation.
- High rates of prescriptions for opioids and benzodiazepines increases risk for misuse, abuse, and drug interactions not only for older Delawareans but for younger residents as well.
- Currently there are no specialized substance abuse treatment services within Delaware designed to address the unique needs of older residents.
- Population trends and projections indicate that these needs will become greater as Delaware's older population continues to grow.

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