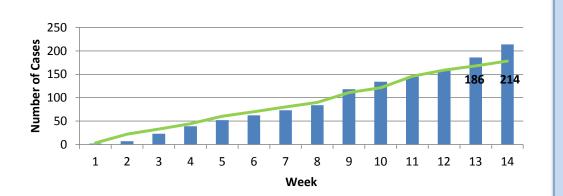
Drug Dependent Newborns (Neonatal Abstinence Syndrome) March 2014 Update (Data through 04/05/2014)

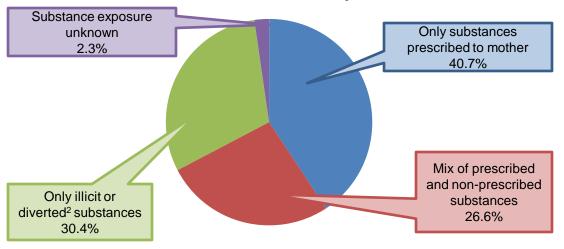


Cumulative Cases NAS Reported



2014 Cases -2013 Cases

Maternal Source of Exposure



Quick Facts: NAS in Tennessee

- 214 cases of Neonatal Abstinence Syndrome (NAS) have been reported since January 1, 2014
- In the majority of NAS cases (67.3%), at least one of the substances causing NAS was prescribed to the mother by a health care provider.
- The highest rates of NAS in 2014 have occurred in Sullivan County and the East and Northeast Regions.

NAS Prevention Highlight

State prescription drug monitoring programs are associated with lower opioid prescribing rates and overdose deaths. The Tennessee Controlled Substance Monitoring Database (CSMD) was established in 2006, and the Prescription Safety Act of 2012 mandated that providers check the database before prescribing most controlled substances. According to the <u>2014 CSMD</u> Report:

- The number of registrants increased by 56.8% to 34,802 in 2013
- There was a 240% increase in the number of patient reports requested in 2013 (to 4.5 million)
- The number of high-utilization patients ("doctor shoppers") has steadily declined

Additional Detail for Maternal Sources of Exposure

Source of Maternal Substance (if known) ³	# Cases ³	% Cases
Supervised replacement therapy	114	53.3
Supervised pain therapy	35	16.4
Therapy for psychiatric or neurological condition	13	6.1
Prescription substance obtained WITHOUT a prescription	99	46.3
Non-prescription substance	49	22.9
No known exposure but clinical signs consistent with NAS	0	0
No response	5	2.3

NAS Cases by County/Region

Maternal County of Residence (By Health Department Region)	# Cases	Rate per 1,000 births
Davidson	11	4.6
East	63	34.3
Hamilton	3	3.0
Jackson/Madison	0	0
Knox	24	18.8
Mid-Cumberland	18	5.1
North East	30	36.1
Shelby	10	3.0
South Central	6	5.5
South East	3	3.4
Sullivan	15	38.3
Upper Cumberland	21	23.7
West	10	7.1
Total	214	11.2

NAS Prevention Opportunities

Women of Childbearing Age

 Prevention of unintended pregnancy is a key strategy for preventing NAS in women of childbearing age. Women should talk to their primary care providers about <u>effective</u> <u>strategies</u> for preventing an unintended pregnancy.
 Family planning services are available in local health departments in all 95 counties. Click <u>here</u> to find a health department near you.

Health Care Providers

• Screening, Brief Intervention and Referral to Treatment (SBIRT) is an effective strategy for identifying patients with substance abuse and referral to community treatment resources. Learn more about SBIRT and ways to incorporate it into your practice at the <u>SAMHSA-HRSA Center for Integrated Health Solutions</u>.

Everyone

• Learn how to keep yourself and loved ones safe by preventing inappropriate use of medications. Visit the CDC's <u>Medication Safety Program</u> to learn more.

<u>Notes</u>

- 1. Individual weekly summary reports are archived at: <u>http://health.tn.gov/MCH/NAS/NAS_Summary_Archive.shtml</u>
- "Illicit" means drugs which are illegal or prohibited.
 "Diverted" means using legal/prescribed drugs for illegal purposes. For example, using a prescription drug purchased from someone else or using a prescription drug that was prescribed for someone else.
- 3. Multiple maternal substances may be reported; therefore the total number of cases in this table may not match the total number of cases reported.

For questions or additional information, contact Dr. Angela Miller at <u>angela.m.miller@tn.gov</u>.