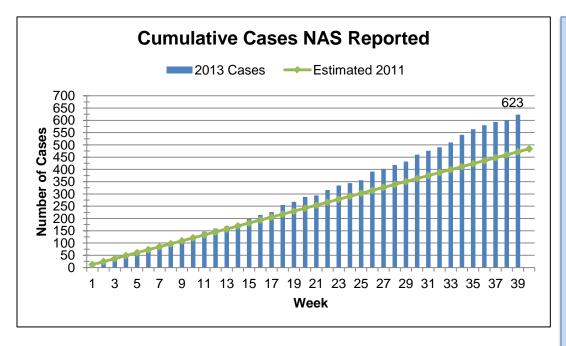
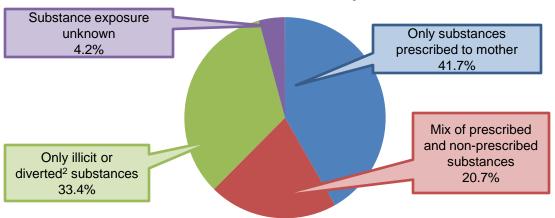
Drug Dependent Newborns (Neonatal Abstinence Syndrome)

September 2013 Update (Data through 9/28/2013)





Maternal Source of Exposure



Quick Facts: NAS in Tennessee

- 623 cases of Neonatal Abstinence Syndrome (NAS) have been reported since January 1, 2013
- In the majority of NAS cases (62.4%), at least one of the substances causing NAS was prescribed by a health care provider.
- The highest rates of NAS in 2013 have occurred in Sullivan County and the Northeast Region.

NAS Prevention Highlight

On September 10, the <u>US Food and Drug</u>
<u>Administration (FDA) announced</u> class-wide
safety and labeling changes for long-acting and
extended release opioid analgesics. The new
policy updates the indication for these
medications to state that they "are indicated for
the management of pain severe enough to require
daily, around-the-clock, long-term opioid
treatment and for which alternative treatment
options are inadequate." The new labeling
requirements also include a boxed warning
stating that chronic use during pregnancy can
lead to withdrawal syndrome in newborns.
Tennessee's NAS Subcabinet first petitioned the
FDA for a boxed warning in November 2012.

Additional Detail for Maternal Sources of Exposure

Source of Maternal Substance (if known) ³	# Cases ³	% Cases
Supervised replacement therapy	273	43.8%
Supervised pain therapy	132	21.2%
Therapy for psychiatric or neurological condition	49	7.9%
Prescription substance obtained WITHOUT a prescription	245	39.3%
Non-prescription substance	177	28.4%
No known exposure but clinical signs consistent with NAS	11	1.8%
No response	15	2.4%

NAS Cases by County/Region

Maternal County of Residence (By Health Department Region)	# Cases	Rate per 1,000 births
Davidson	31	4.2
East	168	28.1
Hamilton	11	3.5
Jackson/Madison	1	1.0
Knox	70	17.5
Mid-Cumberland	43	3.8
North East	96	37.3
Shelby	11	1.1
South Central	20	5.8
South East	10	3.9
Sullivan	63	54.1
Upper Cumberland	80	28.3
West	19	4.2
Total	623	10.4

NAS Prevention Opportunities

Women of Childbearing Age

- Ask your health care provider about the risks of any medication that you are taking.
- Take only medications that are prescribed to you. Never use someone else's medication.

Health Care Providers

- <u>Screen all pregnant women</u> for substance use and refer for appropriate treatment.
- Talk with women of childbearing age about their plans for becoming pregnant. Counsel them on <u>effective</u> <u>strategies</u> for preventing an unintended pregnancy.
- Before writing a prescription for a controlled medication, check the Tennessee Controlled Substance Monitoring Database. Log on at:

https://www.tncsmd.com/Login.aspx

Everyone

 Dispose of unwanted or outdated medications at your nearest drop-off location. Find yours at: http://tn.gov/environment/sustainable-practices unwanted-prescriptions.shtml

Notes

- 1. Individual weekly summary reports are archived at: http://health.tn.gov/MCH/NAS/NAS_Summary_Archive.shtml
- 2. "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. Michael Warren at michael.d.warren@tn.gov.