

National Institute on Drug Abuse (NIDA) West Virginia Opioid Summary

Last Updated March 2019
<https://www.drugabuse.gov>

West Virginia Opioid Summary

Opioid-Involved Overdose Deaths

West Virginia has the highest age-adjusted rate of drug overdose deaths involving opioids. In 2017, there were 833 drug overdose deaths involving opioids in West Virginia—a rate of 49.6 deaths per 100,000 persons. This is the double the rate in 2010 and threefold higher than the national rate of 14.6 deaths per 100,000 persons. The sharpest increase in opioid involved overdose deaths was seen in cases involving synthetic opioids other than methadone (mainly fentanyl): a rise from 122 deaths in 2014 to 618 deaths in 2017 (Figure 1). Deaths involving heroin also increased significantly in the same 3-year period: from 163 to 244 deaths. Prescription opioid-involved deaths decreased by 20% from 383 in 2014 to 304 in 2017.

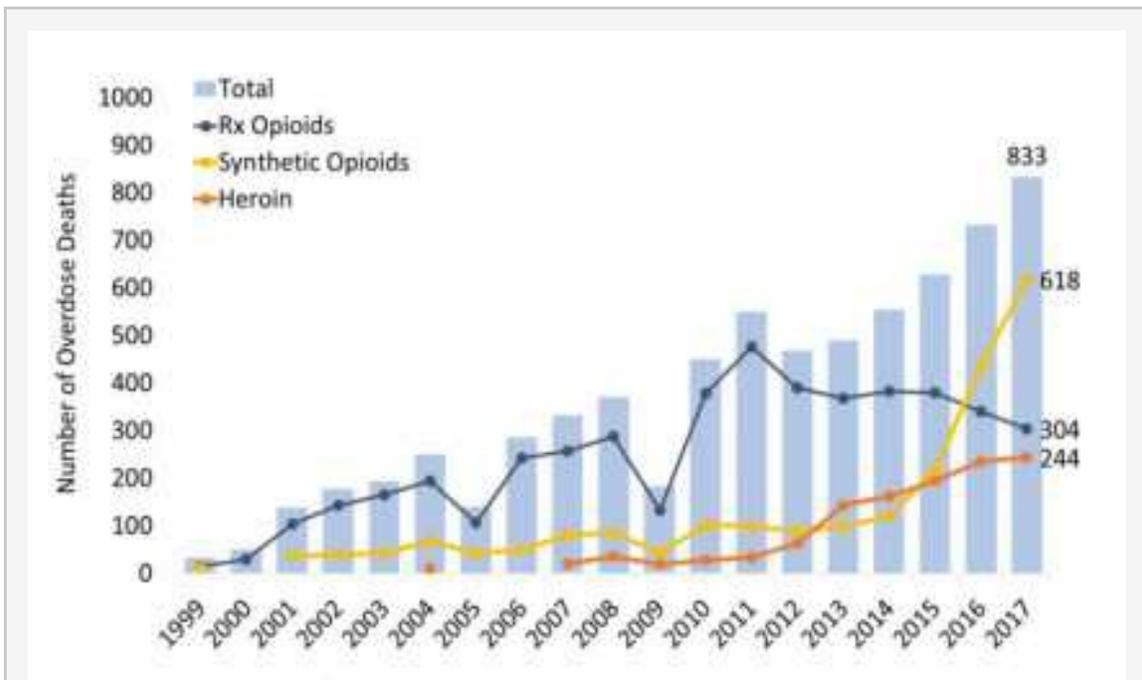


Figure 1. Number of overdose deaths involving opioids in West Virginia, by opioid category. Drug categories presented are not mutually exclusive, and deaths might have involved more than one substance. Source: CDC WONDER.

Opioid Pain Reliever Prescriptions

In 2017, West Virginia providers wrote 81.3 opioid prescriptions for every 100 persons (Figure 2), compared to the average U.S. rate of 58.7 prescriptions. This was among the top ten rates in the United States that year ([CDC](#)); however, it was also the lowest rate in the state since data became available in 2006. The age-adjusted rate of overdose deaths involving opioid prescriptions has also followed a decreasing trend from a peak of 27.3 deaths per 100,000 persons in 2011 to 17.2 deaths per 100,000 persons in 2017

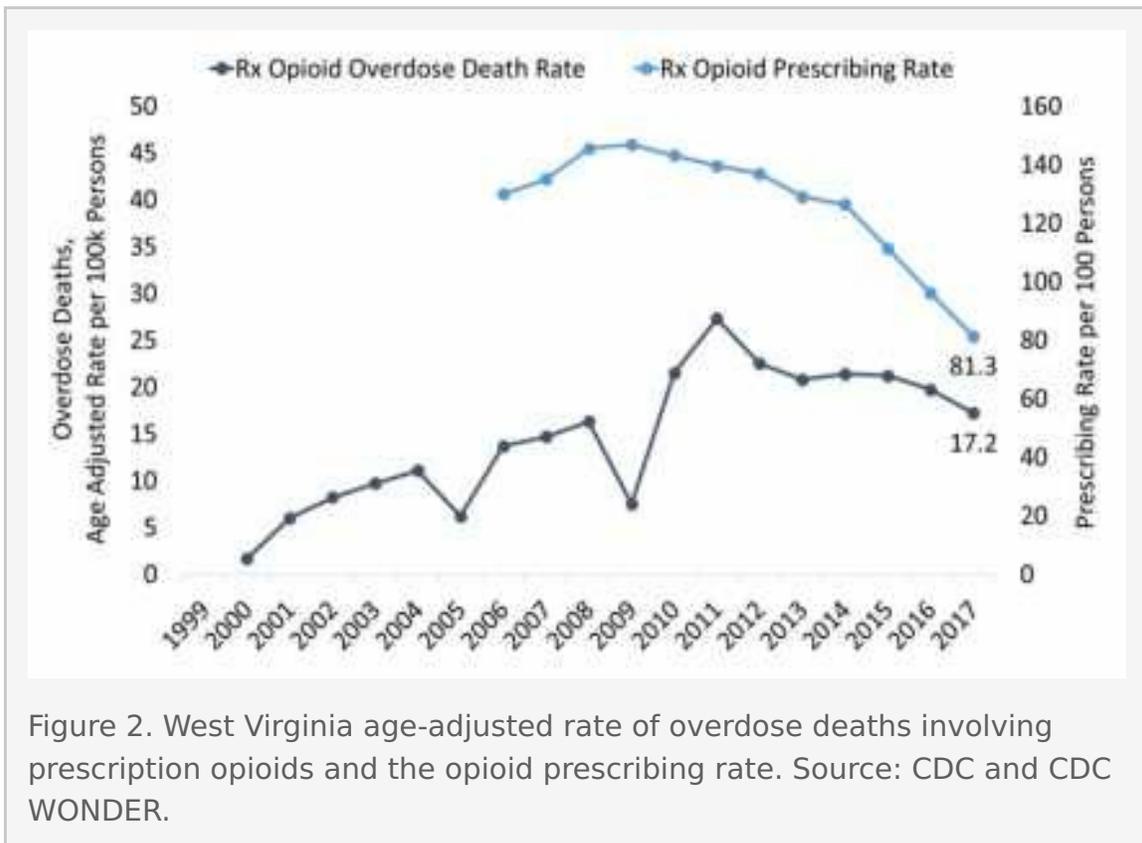


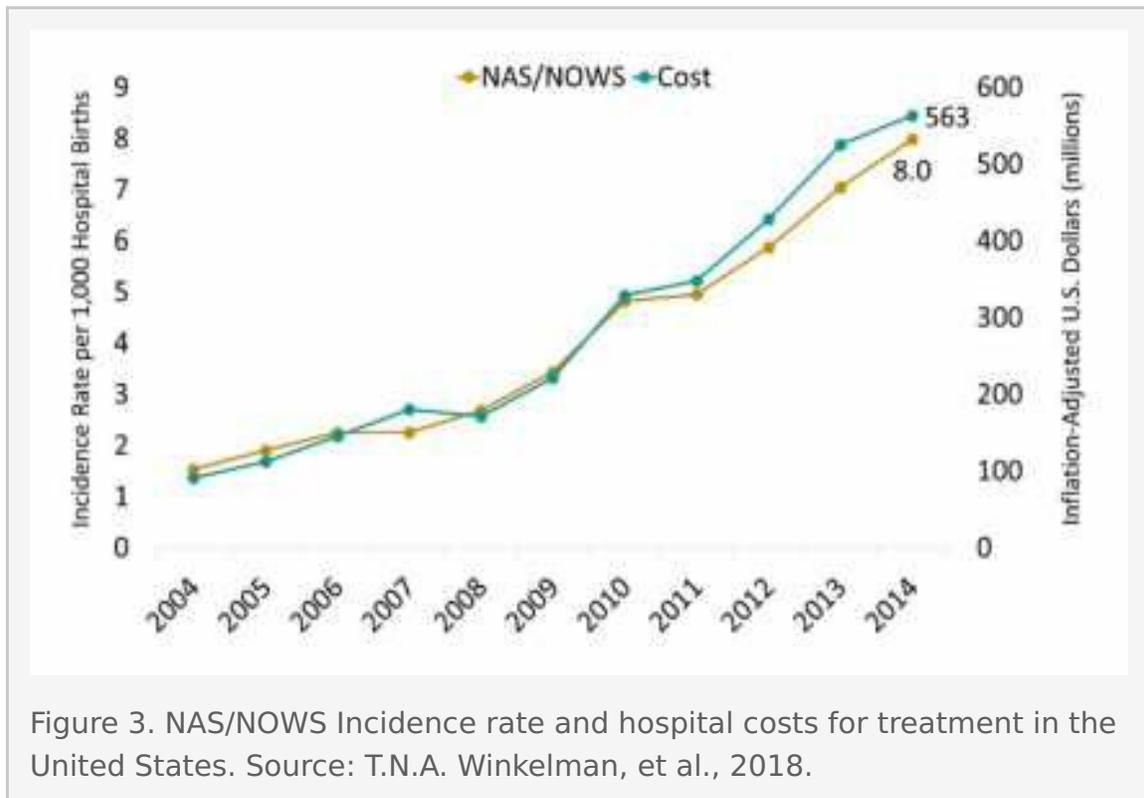
Figure 2. West Virginia age-adjusted rate of overdose deaths involving prescription opioids and the opioid prescribing rate. Source: CDC and CDC WONDER.

Neonatal Abstinence Syndrome (NAS)

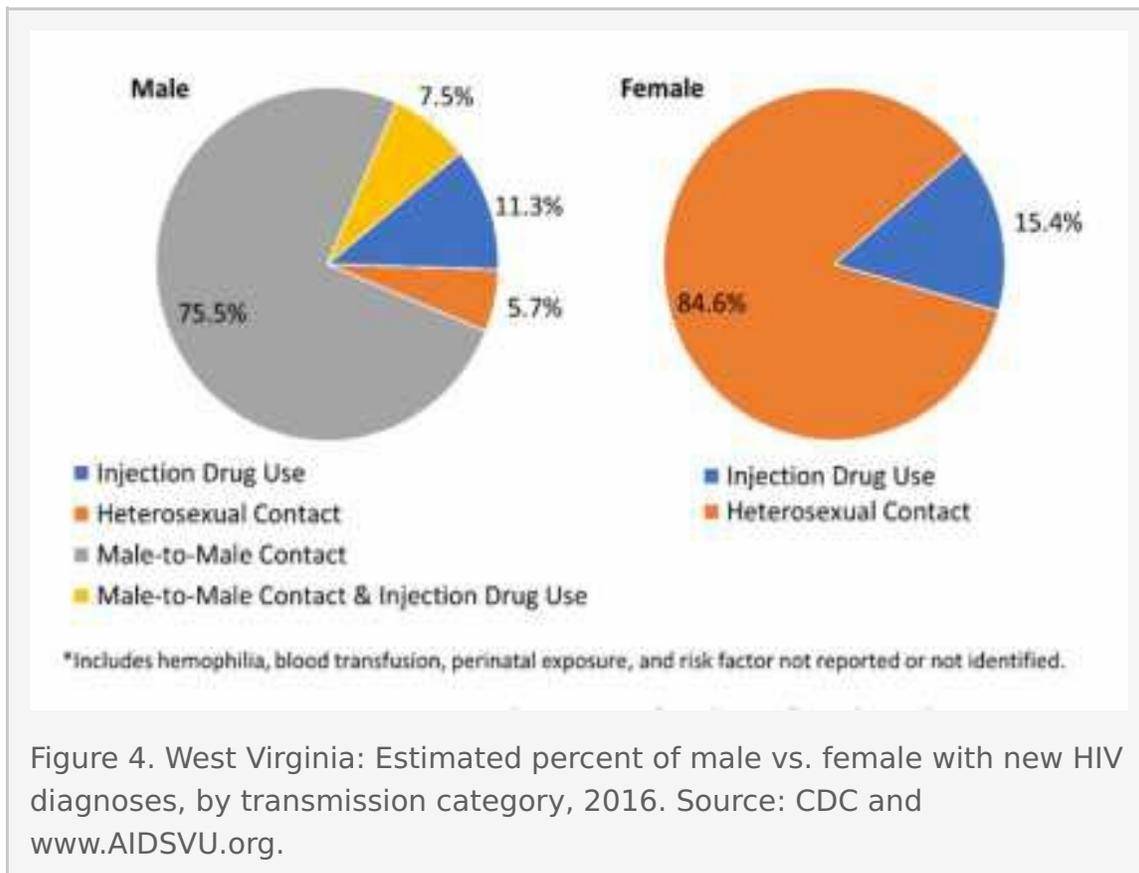
NAS or neonatal opioid withdrawal syndrome (NOWS) may occur when a pregnant woman uses drugs such as opioids during pregnancy. A recent national study revealed a fivefold increase in the incidence of NAS/NOWS between 2004 and 2014, from 1.5 cases per 1,000 hospital births to 8.0 cases per 1,000 hospital births. This is the equivalent of one baby born with symptoms of NAS/NOWS every 15 minutes in the

United States. During the same period, hospital costs for NAS/NOWS births increased from \$91 million to \$563 million, after adjusting for inflation (Figure 3).

In West Virginia, the rate of NAS/NOWS cases doubled in the 3-year period between 2011 and 2014, from 25.2 cases to 51.2 cases per 1,000 hospital births. The highest rates of NAS/NOWS were reported from Marshall and Lincoln counties (10.21 and 10.66 cases per 1,000 hospital births, respectively) ([West Virginia Health and Human Resources Bureau for Public Health](#)).



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



- U.S. Incidence:** In 2016, 9 percent (3,480) of the 39,589 new diagnoses of HIV in the United States were attributed to IDU. Among males, 6.3 percent (2,530) of new cases were transmitted via IDU or male-to-male contact and IDU. Among females, 2.3 percent (950) were transmitted via IDU. ([CDC](#)).
- U.S. Prevalence:** In 2016, 991,447 Americans were living with a diagnosed HIV infection—a rate of 306.6 cases per 100,000 persons. Among males, 19.9 percent (150,466) contracted HIV from IDU or male-to-male contact and IDU while 21 percent (50,154) of females were living with HIV attributed to IDU ([CDC](#)).
- State Incidence:** Of the new HIV cases in 2016, 66 occurred in West Virginia. Among males, 18.8 percent of new HIV cases were attributed to IDU or male-to-male contact and IDU. Among females, 15.4 percent of new HIV cases were attributed to IDU (Figure 4) ([AIDSVU](#)).
- State Prevalence:** In 2015, an estimated 1,781 persons were living with a diagnosed HIV infection in West Virginia—a rate of 113

cases per 100,000 persons. Of those, 19.4 percent of male cases were attributed to IDU or male-to-male contact and IDU. Among females, 27.5 percent were living with HIV attributed to IDU ([AIDSVu](#)).

Hepatitis C (HCV) Prevalence and HCV Diagnoses Attributed to Injection Drug Use¹

- **U.S. Incidence:** In 2016, there were an estimated 41,200 new cases of acute HCV² ([CDC](#)). Among case reports that contain information about IDU, 68.6 percent indicated use of injection drugs ([CDC](#)).
- **U.S. Prevalence:** An estimated 2.4 million Americans are living with HCV based on 2013-2016 annual averages ([CDC](#)).
- **State Incidence:** There were approximately 94 new cases of acute HCV (5.1 per 100,000 persons) reported in West Virginia in 2016 ([CDC](#)).
- **State Prevalence:** In West Virginia, there are an estimated 20,800 persons living with Hepatitis C (2013-2016 annual average), a rate of 1,430 cases per 100,000 persons ([HepVu](#)).

National Institutes of Health-Funded Research

The National Institute on Drug Abuse (NIDA), in partnership with the Appalachian Regional Commission (ARC) are supporting services planning research grants to address a dramatic increase in adverse outcomes associated with increased opioid injection drug use in Appalachia. The grants will help develop an epidemiologic understanding of opioid injection drug use, HIV and hepatitis C virus (HCV) infection risk, and other adverse health consequences of drug use in any of the 420 Appalachian counties (<http://www.arc.gov/counties>).

Additional Resources

- [West Virginia Department of Health and Human Resources](#)
- Centers for Disease Control and Prevention, [Opioid Overdose](#)



FY2018 NIH-funded projects related to opioid use and use disorder in West Virginia: 4

[VIEW RESULTS](#)

[Find treatment in West Virginia \(SAMHSA\)](#)

Notes

1. Not all states collect or report data on the incidence or prevalence of Hepatitis C or on how Hepatitis C is transmitted. When available, the data will be included.
2. Actual acute cases are estimated to be 13.9 times the number of reported cases in any year.