The American Opioid Epidemic in Special Populations: Five Examples

The United States is in the midst of an unprecedented crisis of prescription and illicit opioid misuse, use disorder, and overdose. Although the crisis has affected large swaths of the U.S. population, it has impacted certain segments of the population with an extra level of intensity—justice-involved populations, rural populations, veterans, adolescents and young adults, and people who inject drugs. Research has clearly shown that solutions for the opioid overdose epidemic are not one size fits all, and special attention should be paid to these populations that may be suffering unduly.

The discussion paper “The American Opioid Epidemic in Special Populations: Five Examples” focuses on these five identified populations and, for each, reviews why the population is an important area of focus, current barriers encountered in accessing care, promising approaches in supporting this population, and high-impact research and action priorities.

The Importance of People Who Inject Drugs

People who inject drugs (PWID) are at a higher risk for opioid injection drug use-related infectious diseases, including HIV and viral hepatitis. Beyond infectious disease-related harms, PWID are at increased risk for substance use disorder (SUD), drug overdose, and engaging in high-risk sexual behaviors and social and structural challenges that limit seeking, accessing, and receiving substance use and infectious disease treatment, and harm reduction services.

A recent systematic review estimated 23% of PWID in the U.S. had experienced a recent non-fatal overdose and 45% had experienced a fatal or non-fatal overdose.
Promising Approaches for People Who Inject Drugs

Reducing risk for overdose, infectious disease transmission, and other injection-related harms among people who inject drugs requires a comprehensive approach that focuses on:

- Increasing access to sterile injection equipment and education on safe injection practices, infection prevention strategies, appropriate wound care, and reducing high-risk sexual behaviors
- Expanding medication for opioid use disorder (MOUD) treatment and other evidence-based treatment and recovery supports
- Increasing HIV testing, counseling, provision of pre-exposure prophylaxis (PrEP), and improving linkage to antiretroviral treatment
- Scaling up viral hepatitis testing, linkage to direct-acting antiviral (DAA) treatment for hepatitis C virus (HCV) and vaccination for hepatitis A virus (HAV) and hepatitis B virus (HBV)
- Increasing the provision of overdose prevention education and naloxone distribution

Research and Action Priorities for People Who Inject Drugs

- Increasing access to sterile injection equipment and education on safe injection practices, infection prevention strategies, and appropriate wound care through the expansion of syringe service programs (SSPs)
- Expanding access to MOUD among PWID, especially buprenorphine and methadone.
- Increasing HIV and hepatitis testing, counseling, provision of PrEP, and improved linkage to antiretroviral treatment to prevent the transmission of HIV and hepatitis
- Scaling up viral hepatitis testing, linkage to direct-acting antiviral treatment, and vaccination for HAV and HBV
- Increasing access to overdose prevention education and naloxone distribution among PWID
- Expanding research to identify innovative service delivery models that can increase provision of MOUD and naloxone, access to infectious disease testing and treatment, and retention in treatment among PWID


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