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WV Methadone Chronology

- 1999 – 2000 Doctors begin prescribing Methadone instead of OxyContin for pain
- 2000 1st Methadone Clinic opens in West Virginia
- 2004 Medical Examiner conducts 1st comprehensive study of substances found in drug related overdose deaths
- 2006 New FDA regulation concerning Methadone
- 2007 New State Law regulating Methadone Clinics
- 2007 Methadone Clinics institute tighter controls on take home dosages.
### States With the Largest Rate of Increase in Methadone Deaths 1999 to 2004

Source: Center for Disease Control (CDC)

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Total US</td>
<td>623</td>
<td>3,202</td>
<td>5.1</td>
</tr>
<tr>
<td>West Virginia</td>
<td>4</td>
<td>99</td>
<td>24.8</td>
</tr>
<tr>
<td>Ohio</td>
<td>7</td>
<td>122</td>
<td>17.4</td>
</tr>
<tr>
<td>Louisiana</td>
<td>4</td>
<td>64</td>
<td>16</td>
</tr>
<tr>
<td>Kentucky</td>
<td>8</td>
<td>121</td>
<td>15.1</td>
</tr>
<tr>
<td>New Hampshire</td>
<td>2</td>
<td>29</td>
<td>14.5</td>
</tr>
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<td>Florida</td>
<td>29</td>
<td>400</td>
<td>13.8</td>
</tr>
<tr>
<td>Oregon</td>
<td>5</td>
<td>68</td>
<td>13.6</td>
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<tr>
<td>Pennsylvania</td>
<td>7</td>
<td>88</td>
<td>12.6</td>
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<tr>
<td>Tennessee</td>
<td>8</td>
<td>99</td>
<td>12.4</td>
</tr>
<tr>
<td>Wisconsin</td>
<td>6</td>
<td>63</td>
<td>10.5</td>
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<tr>
<td>Maine</td>
<td>5</td>
<td>52</td>
<td>10</td>
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</table>
METHADONE

• ACCORDING TO THE WEST VIRGINIA MEDICAL EXAMINER’S OFFICE, METHADONE HAS BEEN THE LEADING SUBSTANCE FOUND IN DRUG RELATED OVERDOSE DEATHS IN WEST VIRGINIA FOR THE PAST FOUR (4) YEARS.
West Virginia Methadone Overdose Deaths
2004 - 2007
2006 DRUG RELATED OVERDOSE DEATHS IN WEST VIRGINIA

- METHADONE: 136
- DIAZEPAM (VALIUM): 99
- COCAINE: 94
- ALCOHOL: 86
- HYDROCODONE: 84
- OXYCODONE: 80
- MORPHINE/HEROIN: 70
- ALPRAZOLAM (XANAX): 58
- FENTANYL: 40
- PROPOXYPHENE: 27

DEATHS
## 2007 DRUG RELATED OVERDOSES IN West Virginia

<table>
<thead>
<tr>
<th>DRUG</th>
<th>DEATHS</th>
<th>TRADE NAMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Methadone</td>
<td>96 (112)</td>
<td>Methadone, Dolophine.</td>
</tr>
<tr>
<td>2. Oxycodone</td>
<td>84 (115)</td>
<td>OxyContin, Percodan</td>
</tr>
<tr>
<td>3. Heroin / Morp.</td>
<td>77 (94)</td>
<td>MS Contin, Kadian</td>
</tr>
<tr>
<td>4. Fentanyl</td>
<td>55 (63)</td>
<td>Duragesic, Actiq</td>
</tr>
<tr>
<td>5. Hydrocodone</td>
<td>38 (69)</td>
<td>Lortab, Vicodin</td>
</tr>
<tr>
<td>6. Cocaine</td>
<td>33 (96)</td>
<td></td>
</tr>
<tr>
<td>7. Alcohol</td>
<td>27 (99)</td>
<td></td>
</tr>
<tr>
<td>8. Propoxyphene</td>
<td>16 (34)</td>
<td>Darvon, Darvocet</td>
</tr>
<tr>
<td>9. Alprazolam</td>
<td>7 (146)</td>
<td>Xanax</td>
</tr>
<tr>
<td>10. Diazepam</td>
<td>0 (165)</td>
<td>Valium</td>
</tr>
</tbody>
</table>
2007 West Virginia State Law

• Initial assessment prior to administration shall include a drug test to determine if patient is either opioid addicted or currently receiving methadone.

• Within 7 days of admission into a program, the NTP shall complete an initial assessment and an initial plan of care. Within 13 days the NTP shall develop a treatment plan of care and attach it to the chart.

• Each NTP shall report, at least semi-annually, statistics to the Department of Health.
2007 West Virginia State Law (Cont.)

• Required Reporting Information
  Total number of patients,
  – The number of patients who have been continually receiving methadone treatment in excess of 2 years
  – Total number of months of treatment for each such patient
  – State residency of each patient
  – Number of patients discharged from the program prior to discharge and the reason for discharge
2007 West Virginia State Law (Cont.)

• Random Drug Testing - Positive drug tests result after the first 6 months in an opioid treatment program shall result in the following:
  – 1st positive drug test – shall require mandatory & documented weekly counseling to the patient & revocation of take home methadone privilege for a minimum of 30 days.
  – 2nd positive drug test (within 6 months of 1st positive test) – shall mandatory & documented weekly counseling to the patient & revocation of take home methadone privilege for a minimum of 60 days.
  – 3rd positive drug test (within 6 months of 1st positive test) – shall mandatory & documented weekly counseling to the patient & revocation of take home methadone privilege for a minimum of 120 days.
  – 4th positive drug test (within 6 months of 1st positive test) – The patient shall immediately discharged or shall immediately be provided the opportunity to participate in a 21-day detoxification plan followed by immediate discharge.
2007 West Virginia State Law (Cont.)

• NTPs must report statistics to the Department of Health demonstrating compliance with the random drug test rules

• All NTPs must be open for business seven days per week

• The NTPs must check with the WV Board of Pharmacy prior to admission of a patient into the program and at each 90-day review to ensure the patient is not seeking prescription medication from multiple sources.
**Location of Methadone Clinics in West Virginia**

<table>
<thead>
<tr>
<th>Location</th>
<th>Opening Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charleston, WV</td>
<td>December 2000</td>
</tr>
<tr>
<td>Huntington, WV</td>
<td>January 2003</td>
</tr>
<tr>
<td>Beckley, WV</td>
<td>December 2002</td>
</tr>
<tr>
<td>Williamson, WV</td>
<td>April 2003</td>
</tr>
<tr>
<td>Parkersburg, WV</td>
<td>June 2002</td>
</tr>
<tr>
<td>Clarksburg, WV</td>
<td>March 2002</td>
</tr>
<tr>
<td>Wheeling, WV</td>
<td>November 2004</td>
</tr>
<tr>
<td>Martinsburg, WV</td>
<td>February 2002</td>
</tr>
<tr>
<td>Morgantown, WV</td>
<td>Pending</td>
</tr>
</tbody>
</table>

- WV currently has approximately 4500 patients enrolled in NTPs.
2006 West Virginia Methadone Purchases

- Over 99% (2006) of the liquid methadone in West Virginia is purchased and dispensed by NTPs.

- Over 72% (2006) of the 40mg tablet methadone in West Virginia is purchased and dispensed by NTPs.
2006 National Methadone Purchases

• Nationally (2006), approximately ninety-eight (98%) of liquid Methadone is purchased and dispensed by NTPs.

• Nationally (2006), approximately forty-five (45%) of 40 mg methadone diskettes are dispensed by NTPs.
2007 West Virginia Methadone Purchases

• Over 99% (2007) of the liquid methadone in West Virginia is purchased and dispensed by NTPs.

• 51% (2007) of the 40mg tablet Methadone in West Virginia is purchased and dispensed by NTPs.
2007 National Methadone Purchases

• Nationally (2007), approximately ninety-eight (98%) of liquid Methadone is purchased and dispensed by NTPs.

• Nationally (2007), approximately forty-five (40%) of 40 mg methadone diskettes are dispensed by NTPs.
2008 West Virginia Methadone Purchases

- Over 99% (January – June 2008) of the liquid methadone in West Virginia is purchased and dispensed by NTPs.

- Over 99% (January – June 2008) of the 40mg tablet methadone in West Virginia is purchased and dispensed by NTPs.
2008 National Methadone Purchases

• Nationally (2008), approximately ninety-eight (97%) of liquid Methadone is purchased and dispensed by NTPs.

• Nationally (2008), approximately forty-five (96%) of 40 mg methadone diskettes is dispensed by NTPs.
Analysis Conducted by the West Virginia State Police Crime Laboratory

- 2004: 25 tablets, 12 liquids
- 2005: 42 tablets, 8 liquids
- 2006: 55 tablets, 20 liquids
- 2007: 26 tablets, 6 liquids
Debrief of Source of Information (SOI)

- On 9/11/08, DEA WV interviewed a SOI.
- The SOI stated that he/she obtained methadone when he/she could not obtain OxyContin. The SOI indicated that he/she obtained methadone from patients who had received it from NTPs.
- The SOI indicated that the seller would sell the methadone in the bottle obtained from the clinic with the seal which the clinic affixed to the bottle intact. The SOI stated that the seller would also leave the label on the bottle which specified the dosage. The SOI stated that when the sale was completed the seller would then remove the label so that the patient’s identifying number was not available.
METHADONE DIVERSION

• Intelligence and Direct Evidence from West Virginia Law Enforcement indicates that the Diversion of Methadone is occurring in West Virginia from both Practitioners (prescriptions) and Narcotic Treatment Programs (“Take home doses”) and it is likely that both are contributing to the high Methadone Overdose rate in West Virginia.
CONCLUSION

• All parties in West Virginia have made strides towards reducing the number of Methadone Overdose deaths.

• The Medical Examiner’s 2008 figures will determine if additional steps will be needed to further reduce the number of overdose deaths.

• If additional work is needed, then all parties will have to work together to reduce the methadone overdose death rate.