CDC reports a record 81,000 drug overdose deaths in the US in a 12-month period

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More than 81,000 people died from drug overdoses between June 2019 and May 2020 in the United States according to a new report by the Centers for Disease Control and Prevention (CDC), the highest number of overdose deaths recorded in a 12-month period.

The report noted that overdose deaths were already increasing before the pandemic, but that the data shows an acceleration in death rates following the outbreak of COVID-19 in the US.

The leading factor in this rise in deaths has been attributed to the use of synthetic opioids such as fentanyl. The number of synthetic opioid deaths rose by 38.4 percent from the 12-month period ending in May 2019 compared to the 12-month period ending in May 2020.

Of the 38 jurisdictions with synthetic opioid overdose data, 37 reported an increase in deaths, 18 of which reported increases over 50 percent. Ten western states also reported an increase in synthetic-opioid–related deaths of more than 98 percent. The CDC did not specify the states.

Additionally, cocaine overdose deaths rose 26.5 percent, and deaths related to psychostimulants, such as methamphetamine, rose 34.6 percent. The CDC believes that the rise in cocaine overdose deaths was influenced by co-use or contamination with fentanyl or heroin. The report also noted that the number of deaths involving psychostimulants has surpassed cocaine-related deaths.

The acceleration in drug overdose deaths during the pandemic is a development of a broader exponential growth in such fatalities over the past four decades. The number of drug overdose deaths rose from 1.13 per 100,000 people in 1979 to 16.96 per 100,000 in 2016, according to research published in *Science* magazine. This growth has resulted in just under 600,000 deaths over a 38-year span, with a doubling of deaths every 9 years.

The trends for individual drugs have fluctuated over time; however, the last 20 years have seen opioids take a central position in the growth of overdose deaths. According to data from the CDC, the number of opioid prescriptions is three times higher than in 1999.

Opioid prescriptions and overdose deaths steadily rose throughout the 2000s. Prescriptions peaked in 2012 with 255 million issued at a rate of 81.3 per 100,000. The total volume of opioids dispensed peaked in 2010 at 782 morphine milligram equivalents (MMEs) per capita.

Since then, the total number of prescriptions has fallen considerably to 153 million in 2019. The immediate cause of this reduction in prescriptions was the publication of several studies between 2010 and 2012 providing evidence of the addictive qualities of prescription opioids and their relation to high rates of substance abuse and overdoses.

While prescriptions have declined, the death rate has remained high and even accelerated. This was largely a result of the rapid rise in fentanyl and heroin use since 2010. People who had become addicted to opioids quickly found it more difficult to acquire a steady supply due to a crackdown on pill-mill pharmacies. Without any substantial government funding for addiction rehabilitation, thousands of addicts were left to find their way to more dangerous substances.

Illegally manufactured fentanyl and heroin quickly became cheap and powerful alternatives to prescription opioids. Fentanyl is 100 times more potent than morphine and 50 times more potent than heroin. Because of this, it is often used to cut heroin or to create counterfeit opioids, sometimes resulting in unintentional consumption.

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Purdue Pharma, the company that produces OxyContin, launched an extensive and coordinated campaign in the early 2000s to expand opioid sales and promoted the myth that its product was non-addictive.

Purdue gathered data on which physicians had the largest number of patients with chronic pain. They then used that data to target where they concentrated their marketing and sales staff. By 2003, nearly half of all OxyContin-prescribing physicians were primary care physicians.

The result was that physicians often did not have the expertise or time to assess pain levels and accurate pharmaceutical needs. By 2002, Purdue had multiplied its OxyContin prescriptions to 6.7 million, 10 times the number in 1997. In 1996, OxyContin sales were $44 million. Between 2001 and 2002, Purdue sold $3 billion worth of opioids.

Over this time, and still today, Purdue and other opioid manufacturers refused to admit any connection between opioid use and addiction. Salesmen promoted the limited research showing fewer than 1 percent of people became addicted when treated for short terms.

However, further research into the long-term use of OxyContin showed considerable addictive qualities. The evidence on this was so compelling that Purdue was forced to pay $634 million in fines along with several executives pleading guilty to misbranding OxyContin as nonaddictive in 2007.

In 2019, Purdue filed for bankruptcy after more than 2,000 lawsuits were filed against them by cities and states. With the evidence stacked against them, the Sackler family and Purdue executives decided to plan for the inevitable.

While Purdue still denies wrongdoing, as of October 2020 it has agreed to pay $8 billion in settlements, $3.5 billion in criminal fines and $2.8 billion in damages. Compared to the $35 billion in profit that was made from selling OxyContin, this is a fairly light punishment for causing the deaths of hundreds of thousands.

Purdue will also restructure into a “public-benefit company.” Ostensibly, this will make Purdue committed to public health and providing funds to state and local governments for opioid relief programs. What this will actually entail is still to be seen.

Regardless, the Sackler family that founded Purdue has transferred more than $10 billion to their assorted properties in preparation for the litigation, much of which they have squirreled away into offshore bank accounts. They will likely remain billionaires after the collapse of Purdue and will potentially avoid prosecution through a $3 billion personal settlement with litigators.

The rise in drug overdose deaths during the pandemic is indicative of the inability of the country’s for-profit health care system to adequately provide for the social needs of the working class. Millions are suffering from the effects of drug abuse, yet no aid has been given to help people address this issue.

“The disruption to daily life due to the COVID-19 pandemic has hit those with substance use disorder hard,” CDC Director Robert Redfield noted in announcing the annual report. He further added that “it’s important to not lose sight of different groups being affected in other ways. We need to take care of people suffering from unintended consequences.”

The pandemic has vividly exposed all of the failings of the capitalist system, from government bailouts for corporations to the drive to reopen the economy at the expense of hundreds of thousands of lives. This latest data shows in stark detail the effects of failing to fully provide health care, including substance abuse rehabilitation, and the irreparable damage that can be done when the health of the working class is traded for profit.

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