State-by-State
Opioid
Prescribing Data
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ALASKA AGAINST OPIOID DEPENDENCE

Alaska's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Alaskan with 34 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 85 opioid pills, whether they need them or not.¹

102 DEATHS
In 2017, there were 102 overdose deaths involving opioids — a rate of 13.9 deaths per 100,000 persons compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

Sources

1. “Exposing a Silent Gateway to Persistent Opioid Use – A Choices Matter Status Report.” October 2018. [Analysis in the report was based on research conducted by IQVIA Institute for Human Data Science]
2. “United States of Non-Dependence: An Analysis of the Impact of Opioid Overprescribing in America.” September 2017. [Analysis in the report based on research conducted by the Quintiles IMS Institute]
ALABAMA AGAINST OPIOID DEPENDENCE

Alabama’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Alabamian with 65 pills — the highest rate in the country.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

107.2 PRESCRIPTIONS
In 2017, Alabama providers wrote 107.2 opioid prescriptions for every 100 persons. This is the highest prescribing rate in the country.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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Arkansas' Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Arkansan with 64 pills — the second highest rate in the country.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

105.4 PRESCRIPTIONS
In 2017, Arkansas providers wrote 105.4 opioid prescriptions for every 100 persons — nearly twofold greater than the average U.S. rate of 58.7 opioid prescriptions.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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ARIZONA AGAINST OPIOID DEPENDENCE

Arizona’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Arizonan with 41 pills.

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.

61.2 PRESCRIPTIONS
In 2017, Arizona providers wrote 61.2 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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CALIFORNIA AGAINST OPIOID DEPENDENCE

California’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Californian with 27 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

39.5 PRESCRIPTIONS
In 2017, California providers wrote 39.5 opioid prescriptions for every 100 persons. This was among the lowest prescribing rates in the country.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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COLORADO AGAINST OPIOID DEPENDENCE

Colorado’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Coloradan with 32 pills.\(^1\)

In 2017, Colorado providers wrote 52.9 opioid prescriptions for every 100 persons. The average U.S. rate in the same year was 58.7 prescriptions per 100 persons.\(^3\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

52.9 DEATHS
In 2017, Colorado providers wrote 52.9 opioid prescriptions for every 100 persons. The average U.S. rate in the same year was 58.7 prescriptions per 100 persons.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)
CONNECTICUT AGAINST OPIOID DEPENDENCE

Connecticut’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Nutmegger with 28 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

955 DEATHS
In 2017, there were 955 overdose deaths involving opioids—a rate of 27.7 deaths per 100,000 persons, which is twofold higher than the national rate of 14.6 deaths per 100,000 person.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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WASHINGTON D.C. AGAINST OPIOID DEPENDENCE

Washington D.C.’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Washingtonian with 21 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

244 DEATHS
In 2017, there were 244 overdose deaths involving opioids — a rate of 34.7 deaths per 100,000 persons compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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DELAWARE AGAINST OPIOID DEPENDENCE

Delaware’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Delawarean with 42 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

68.3 PRESCRIPTIONS
In 2017, Delaware providers wrote 68.3 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million fewer pills available for diversion and misuse

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FLORIDA AGAINST OPIOID DEPENDENCE

Florida’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Floridian with 40 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

60.9 PRESCRIPTIONS
In 2017, Florida providers wrote 60.9 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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GEORGIA AGAINST OPIOID DEPENDENCE

Georgia’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Georgian with 43 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

70.9 PRESCRIPTIONS
In 2017, Georgia providers wrote 70.9 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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HAWAII AGAINST OPIOID DEPENDENCE

Hawaii's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Hawaiian with 23 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

37 PRESCRIPTIONS
In 2017, Hawaii providers wrote 37.0 opioid prescriptions for every 100 persons, compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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IOWA AGAINST OPIOID DEPENDENCE

Iowa’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Iowan with 36 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

56.4 PRESCRIPTIONS
In 2017, Iowa providers wrote 56.4 opioid prescriptions for every 100 persons. The average U.S. rate in the same year was 58.7 prescriptions per 100 person.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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IDAHO AGAINST OPIOID DEPENDENCE

Idaho’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Idahoan with 50 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

70.3 PRESCRIPTIONS
In 2017, Idaho providers wrote 70.3 opioid prescriptions for every 100 persons. The average U.S. rate in the same year was 58.7 prescriptions per 100 person.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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ILLINOIS AGAINST OPIOID DEPENDENCE

Illinois’ Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Illinoisan with 33 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

2,202 DEATHS
In 2017, there were 2,202 drug overdose deaths involving opioids — a rate of 17.2 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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INDIANA AGAINST OPIOID DEPENDENCE

Indiana’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Hoosier with 52 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

74.2 PRESCRIPTIONS
In 2017, Indiana providers wrote 74.2 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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KANSAS AGAINST
OPIOID DEPENDENCE

Kansas’ Operating Rooms Have Become
Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access
to Non-Opioid Pain Management Options

In 2017, enough opioids were
prescribed to provide every
Kansan with 50 pills.\(^1\)

Surgery-related
overprescribing resulted
in 3.3 billion unused pills
available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

69.8 PRESCRIPTIONS
In 2017, Kansas providers wrote 69.8 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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KENTUCKY AGAINST OPIOID DEPENDENCE

Kentucky’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Kentuckian with 59 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

86.8 PRESCRIPTIONS
In 2017, Kentucky providers wrote 86.8 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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LOUISIANA AGAINST OPIOID DEPENDENCE

Louisiana’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Louisianan with 52 pills.\(^2\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse. \(^2\)

82 PILLS

Following surgery, patients receive an average of 82 opioid pills, whether they need them or not. \(^1\)  

89.5 PRESCRIPTIONS

In 2017, Louisiana providers wrote 89.5 opioid prescriptions for every 100 persons. This was among the top five rates in the United States. \(^3\)

3 MILLION

Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users. \(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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MASSACHUSETTS AGAINST 
OPIOID DEPENDENCE

Massachusetts’ Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Massachusettsan with 25 pills.

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.

1,913 DEATHS
In 2017, there were 1,913 drug overdose deaths involving opioids — a rate of 28.2 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
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MARYLAND AGAINST OPIOID DEPENDENCE

Maryland’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Marylanders with 33 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

1,985 DEATHS
In 2017, there were 1,985 drug overdose deaths involving opioids—a rate of 32.2 deaths per 100,000 persons, which is twofold greater than the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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MAINE AGAINST OPIOID DEPENDENCE

Maine’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Mainer with 37 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

360 DEATHS
In 2017, there were 360 drug overdose deaths involving opioids — a rate of 29.9 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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1. “Exposing a Silent Gateway to Persistent Opioid Use – A Choices Matter Status Report.” October 2018. [Analysis in the report was based research conducted by IQVIA Institute for Human Data Science]
2. “United States of Non-Dependence: An Analysis of the Impact of Opioid Overprescribing in America.” September 2017. [Analysis in the report based on research conducted by the Quintiles IMS Institute]
In 2017, enough opioids were prescribed to provide every Michigander with 53 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

<table>
<thead>
<tr>
<th>82 PILLS</th>
<th>2,033 DEATHS</th>
<th>3 MILLION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.(^1)</td>
<td>In 2017, there were 2,033 drug overdose deaths involving opioids — a rate of 21.2 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.(^3)</td>
<td>Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.(^2)</td>
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Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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MINNESOTA AGAINST OPIOID DEPENDENCE

Minnesota’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Minnesotan with 25 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

41 PRESCRIPTIONS
In 2017, Minnesota providers wrote 41.0 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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MISSOURI AGAINST OPIOID DEPENDENCE
Missouri’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Missourian with 52 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

71.8 PRESCRIPTIONS
In 2017, Missouri providers wrote 71.8 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions for every 100 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²
  - 300,000 fewer patients becoming persistent opioid users following surgery each year
  - $830 million saved annually in drug costs alone
  - 332 million few pills available for diversion and misuse

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MISSISSIPPI AGAINST OPIOID DEPENDENCE

Mississippi’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Mississippian with 49 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

92.9 PRESCRIPTIONS
In 2017, Mississippi providers wrote 92.9 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions for every 100 persons.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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Montana Against Opioid Dependence

Montana’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Montanan with 40 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

61.1 PRESCRIPTIONS
In 2017, Montana providers wrote 61.1 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions for every 100 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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- 332 million few pills available for diversion and misuse

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NORTH CAROLINA AGAINST OPIOID DEPENDENCE

North Carolina’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every North Carolinian with 47 pills.  

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.  

82 PILLS  
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.  

1,953 DEATHS  
In 2017, there were 1,953 drug overdose deaths involving opioids—a rate of 19.8 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.  

3 MILLION  
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.  

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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NORTH DAKOTA AGAINST OPIOID DEPENDENCE

North Dakota’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every North Dakotan with 27 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

41.5 PRESCRIPTIONS
In 2017, North Dakota providers wrote 41.5 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million fewer pills available for diversion and misuse

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Nebraska’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Nebraskan with 36 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

56.6 PRESCRIPTIONS
In 2017, Nebraska providers wrote 56.6 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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NEW HAMPSHIRE AGAINST

OPIOID DEPENDENCE

New Hampshire’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every New Hampshirite with 31 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

424 DEATHS
In 2017, there were 424 drug overdose deaths involving opioids—an age-adjusted rate of 34.0 deaths per 100,000 persons, more than twice the average national rate.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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New Jersey Against Opioid Dependence

New Jersey's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every New Jerseyan with 26 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

OVERDOSE DEATHS
The age-adjusted rate of drug overdose deaths increased significantly in 2017 to 30.0 deaths per 100,000 compared to the national rate of 21.7 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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New Mexico Against Opioid Dependence

New Mexico’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every New Mexican with 35 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

332 DEATHS
In 2017, there were 332 overdose deaths involving opioids — a rate of 16.7 deaths per 100,000 persons compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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NEVADA AGAINST OPIOID DEPENDENCE

Nevada's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Nevadan with 53 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

73 PRESCRIPTIONS
In 2017, Nevada providers wrote 73 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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NEW YORK AGAINST OPIOID DEPENDENCE

New York's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every New Yorker with 26 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

3,224 DEATHS
In 2017, there were 3,224 overdose deaths involving opioids — a rate of 16.1 deaths per 100,000 persons compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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OHIO AGAINST
OPIOID DEPENDENCE

Ohio’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Ohioan 41 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

4,293 DEATHS
In 2017, there were 4,293 overdose deaths involving opioids - a rate of 39.2 deaths per 100,000 persons, which is higher than the national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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OKLAHOMA AGAINST
OPIOID DEPENDENCE

Oklahoma’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Oklahoman 61 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

88.1 PRESCRIPTIONS
In 2017, Oklahoma providers wrote 88.1 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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Oregon Against Opioid Dependence

Oregon’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Oregonian with 42 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

66.1 PRESCRIPTIONS
In 2017, Oregon providers wrote 66.1 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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**PENNSYLVANIA AGAINST OPIOID DEPENDENCE**

Pennsylvania’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

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In 2017, enough opioids were prescribed to provide every Pennsylvanian with 39 pills.1

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.2

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<th>OVERDOSE DEATHS</th>
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**Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:**

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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RHODE ISLAND AGAINST OPIOID DEPENDENCE

Rhode Island’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Rhode Islander with 28 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

277 DEATHS
In 2017, there were 277 overdose deaths involving opioids — an age-adjusted rate of 26.9 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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# SOUTH CAROLINA AGAINST OPIOID DEPENDENCE

South Carolina’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

## In 2017, enough opioids were prescribed to provide every South Carolinian with 51 pills.

![Image of pills]

= 10,000,000

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.

## 82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.

## 79.3 PRESCRIPTIONS
In 2017, South Carolina providers wrote 79.3 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions for every 100 persons.

## 3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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SOUTH DAKOTA AGAINST OPIOID DEPENDENCE

South Dakota’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every South Dakotan with 36 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

49 PRESCRIPTIONS
In 2017, South Dakota providers wrote 49 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions for every 100 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

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TENNESSEE AGAINST OPIOID DEPENDENCE

Tennessee’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Tennessean with 62 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

94.4 PRESCRIPTIONS
In 2017, Tennessee providers wrote 94.4 opioid prescriptions for every 100 persons. This was the third highest prescribing rate in the country and 1.5 times greater than the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

If the number of opioid prescriptions written each year is reduced by 10% nationally, it would result in:²

- 300,000 fewer patients becoming persistent opioid users following surgery each year
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### Texas Against Opioid Dependence

Texas' Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

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In 2017, enough opioids were prescribed to provide every Texan with 34 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

### 82 Pills

Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

### 53.1 Prescriptions

In 2017, Texas providers wrote 53.1 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.\(^3\)

### 3 Million

Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

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Giving more patients and doctors access to non-opioid pain management after surgery can stop this trend:

- 300,000 fewer patients becoming persistent opioid users following surgery each year
- $830 million saved annually in drug costs alone
- 332 million few pills available for diversion and misuse

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**Sources**

1. “Exposing a Silent Gateway to Persistent Opioid Use – A Choices Matter Status Report.” October 2018. [Analysis in the report was based research conducted by IQVIA Institute for Human Data Science](https://www.iqvia.com)

2. “United States of Non-Dependence: An Analysis of the Impact of Opioid Overprescribing in America.” September 2017. [Analysis in the report based on research conducted by the Quintiles IMS Institute](https://www.quintilesims.com)

In 2017, enough opioids were prescribed to provide every Utahan with 42 pills.\(^1\)

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.\(^2\)

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.\(^1\)

456 DEATHS
In 2017, there were 456 drug overdose deaths involving opioids — a rate of 15.5 deaths per 100,000 persons, compared to the national rate of 14.6 deaths per 100,000 persons.\(^3\)

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.\(^2\)

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VIRGINIA AGAINST OPIOID DEPENDENCE

Virginia’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Virginian with 31 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

1,241 DEATHS
In 2017, there were 1,241 drug overdose deaths involving opioids — a rate of 14.8 deaths per 100,000 persons, compared to the national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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Vermont Against Opioid Dependence

Vermont’s Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Vermonter with 32 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

114 DEATHS
In 2017, there were 114 drug overdose deaths involving opioids — a rate of 20.0 deaths per 100,000 persons, compared to the national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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WASHINGTON AGAINST OPIOID DEPENDENCE

Washington's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Washingtonian with 37 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

57.2 PRESCRIPTIONS
In 2017, Washington providers wrote 57.2 opioid prescriptions for every 100 persons compared to the average U.S. rate of 58.7 prescriptions.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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WISCONSIN AGAINST OPIOID DEPENDENCE

Wisconsin's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Wisconsinite with 34 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

926 DEATHS
In 2017, there were 926 overdose deaths involving opioids — a rate of 16.9 deaths per 100,000 persons, and higher than the national rate of 14.6 deaths per 100,000 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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WEST VIRGINIA AGAINST OPIOID DEPENDENCE

West Virginia's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every West Virginian with 52 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

833 DEATHS
In 2017, there were 833 drug overdose deaths involving opioids — a rate of 49.6 deaths per 100,000 persons, threefold higher than the national rate of 14.6 deaths per 100,000 persons. This is the highest age-adjusted rate of drug overdose deaths involving opioids.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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Wyoming Against Opioid Dependence

Wyoming's Operating Rooms Have Become Gateways to Opioid Addiction

Lawmakers Can Act Now to Give Patients Access to Non-Opioid Pain Management Options

In 2017, enough opioids were prescribed to provide every Wyomingite with 38 pills.¹

Surgery-related overprescribing resulted in 3.3 billion unused pills available for misuse.²

82 PILLS
Following surgery, patients receive an average of 82 opioid pills, whether they need them or not.¹

64.8 PRESCRIPTIONS
In 2017, Wyoming providers wrote 64.8 opioid prescriptions for every 100 persons. The average U.S. rate in the same year was 58.7 prescriptions per 100 persons.³

3 MILLION
Nearly 3 million patients undergoing surgeries in 2016 became newly persistent opioid users.²

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