

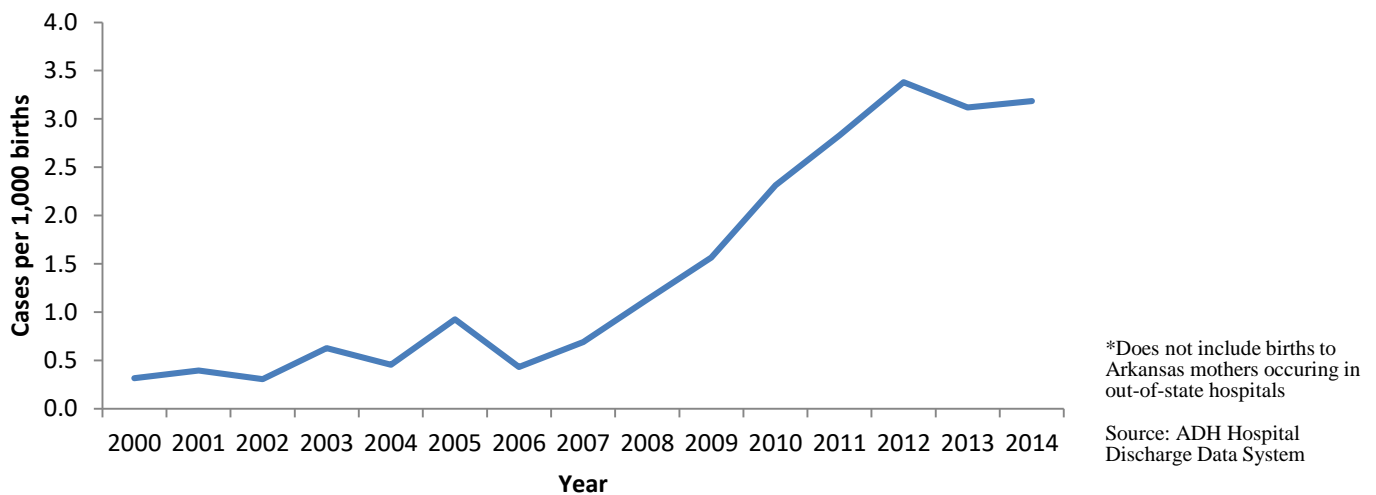


Neonatal Abstinence Syndrome in Arkansas 2000 – 2014

Cases of Neonatal Abstinence Syndrome Continue to Rise

Neonatal abstinence syndrome (NAS) is a constellation of symptoms resulting from drug use during pregnancy. The rate of NAS diagnosis in Arkansas increased more than ten fold between 2000 and 2014 (figure 1). In 2000, the NAS rate was 0.3 per 1,000 births. By 2014, it increased to 3.2 per 1,000 births. The median number of days spent in the hospital for babies diagnosed with NAS was 11, compared to 2 days for babies without NAS in 2014. That same year, median medical care costs for babies diagnosed with NAS was \$31,413 compared to \$3,533 for babies born without NAS.

Figure 1. Rate of neonatal abstinence syndrome per 1,000 hospital births, Arkansas residents, 2000-2014*



Neonatal Abstinence Syndrome is More Common in Certain Groups of People

The rate of neonatal abstinence syndrome (NAS) diagnosis is more than three times higher among whites than it is among non-whites. About four out of every 1,000 white babies are diagnosed with NAS, compared to about one out of every 1,000 among non-whites. Similarly, non-Hispanics have higher rates than Hispanics. NAS rates also vary based on type of insurance. The rate of NAS diagnosis is more than twice as high among women on Medicaid than it is among women with other types of insurance (table 1).

Table 1. Neonatal abstinence syndrome diagnoses: Demographic characteristics and insurance, Arkansas residents, 2014*

		Number	Percent**	Rate per 1,000
Race***	White	100	91.7%	4.1
	Non-white	9	8.3%	1.1
Ethnicity	Hispanic	12	11.0%	2.5
	Non-Hispanic	95	87.2%	3.4
Insurance	Medicaid	83	76.2%	4.7
	Private	15	14.8	1.5
	Other or unknown	11	10.1	2.1

*Totals vary due to missing values.

**Percentages may not add up to 100 due to missing values.

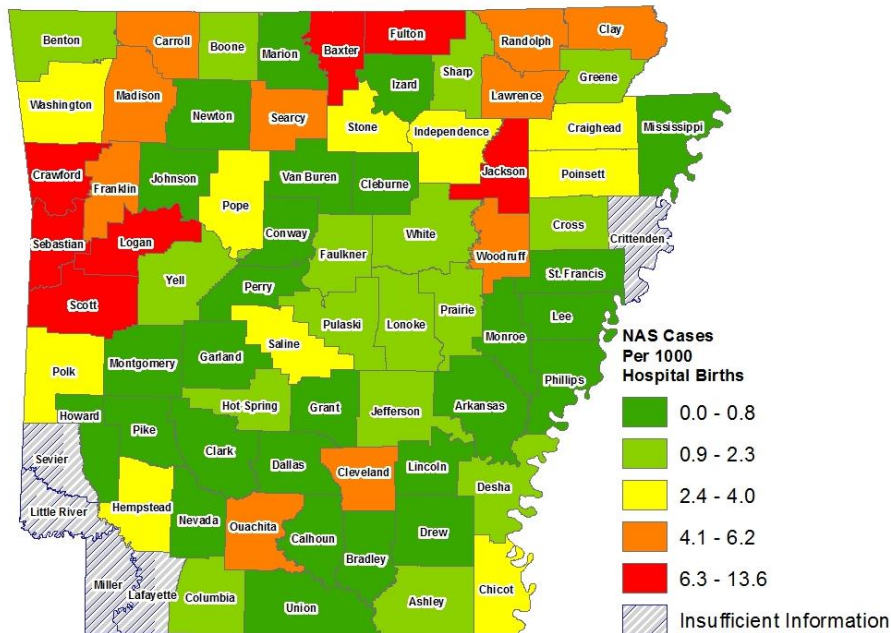
***Non-whites merged into a single category to ensure confidentiality.

Source: ADH Hospital Discharge Data System

NAS Rates Vary by County

The rate of NAS diagnosis is different in different parts of Arkansas. About half of the counties in Arkansas did not report a single case of NAS from 2010 to 2014. On the other hand, there are some counties where up to 14 out of every 1,000 babies are diagnosed with NAS (figure 2).

Figure 2. Neonatal abstinence syndrome diagnoses per 1,000 hospital births, Arkansas residents, 2010 - 2014*



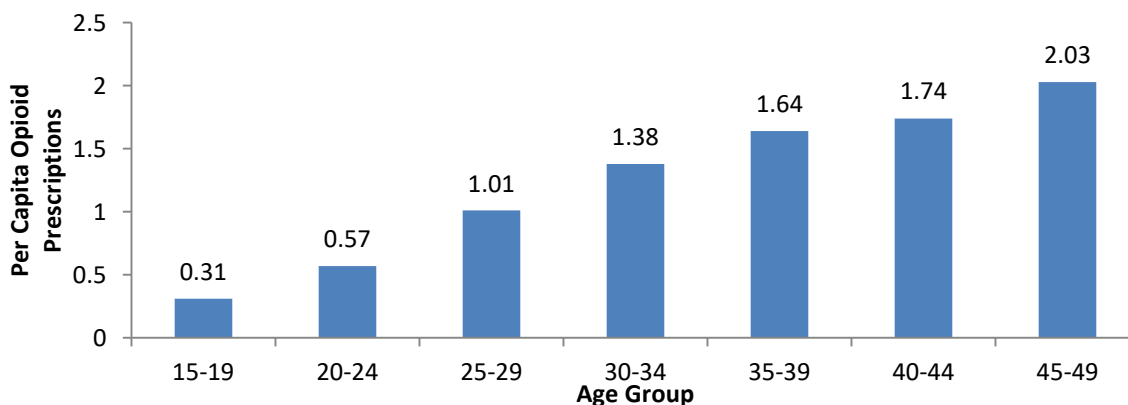
*Does not include births to Arkansas mothers occurring in out-of-state hospitals

Source: ADH Hospital Discharge Data System

Opioid Prescribing to Women of Reproductive Age

Prescription opioid use during pregnancy is a major risk factor for NAS. In Arkansas, women between the ages of 15 and 49 filled between 0.31 and 2.03 opioid prescriptions per capita in 2016 (figure 3). The widespread use of opioids, combined with the fact that many pregnancies are unplanned, creates the potential for a great deal of in utero exposure to opioids. For women who do require opioid therapy, long-acting contraceptives should be used to prevent pregnancy.

Figure 3. Opioid prescriptions filled per capita by women of reproductive age, Arkansas, 2016



Source: Arkansas Prescription Monitoring Program

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