The 2015 Indiana HIV Outbreak: Overview

Jerome Adams, MD, MPH - State Health Commissioner, Indiana State Health Department

Joint Meeting of the Drug Safety and Risk Management Advisory Committee and the Anesthetic and Analgesic Drug Products Advisory Committee

March 13-14, 2017
Dr. Adams has no relevant financial affiliations or other relationships to disclose
Indiana HIV Outbreak: Overview

December 2014: 3 people diagnosed with HIV
- Linked to Austin, IN
- Two had a common-needle sharing partner
- Contact tracing → 8 more people diagnosed with HIV by January 23, 2015
- Only 5 people diagnosed with HIV reported in Scott County 2004-2013

March 5, 2017: 215 people diagnosed with HIV
- All linked to Austin, IN
- Nearly all had experience injecting OPANA® ER
- Infections were recent and from a single strain of HIV
- 204 (95%) co-infected with hepatitis C

The Washington Post
How an HIV outbreak hit rural Indiana — and why we should be paying attention

By Danielle Paquette March 30
Scott County, Indiana

- Population: 24,000 (Austin: 4,235)
- High poverty (19.0%)
- High unemployment (8.9%)
- Low educational attainment (21.3% have not completed high school)
- Ranked last among 92 counties in a variety of health and social indicators, including life expectancy

Sources: U.S. Census http://quickfacts.census.gov/qfd/states/18/18143.html; Indiana State Health Department http://www.in.gov/isdh/17397.htm
Demographics of Individuals Infected with HIV (N=189 at time of assessment)

- 58% male
- 98% non-Hispanic white
- Median age 33.5 years
- 94% reported injecting drugs
  - All reported oxymorphone ("Opana")
  - Some also methamphetamine, heroin

Number of Persons Diagnosed with HIV, by Age

India State Department of Health
Division of HIV/STD
Why OPANA® ER

- 2010 – reformulation of OxyContin®
- OPANA® ER quickly replaced OxyContin® - snorted, injected
- 2012 – OPANA® ER reformulated, impossible to crush/snort
- Short half-life 3-4 hours when injected = multiple injections/day
- High street cost leads to pill sharing
  - $160 per 40 mg tablet during outbreak peak, currently > $200 per tablet
- Potency: higher morphine-equivalent dose (MED) than heroin
- You know what you’re getting

<table>
<thead>
<tr>
<th>Dosage Strength</th>
<th>OPANA® ER with INTAC® Tablet Images*</th>
<th>GENERIC oxymorphone ER Global Pharma (Impax) Tablet Images*</th>
</tr>
</thead>
<tbody>
<tr>
<td>40 mg</td>
<td><img src="40.png" alt="Image" /> <img src="E.png" alt="Image" /></td>
<td><img src="Orange.png" alt="Image" /> <img src="G74.png" alt="Image" /></td>
</tr>
<tr>
<td>30 mg</td>
<td><img src="30.png" alt="Image" /> <img src="E.png" alt="Image" /></td>
<td><img src="Orange.png" alt="Image" /> <img src="G77.png" alt="Image" /></td>
</tr>
</tbody>
</table>
Dispensed Opana® (All) Doses Per Capita, ZIP Code 47102 (Austin, IN) and Indiana

Data Notes: 2016 population estimates are currently unavailable for 47102. 2015 population estimates used for 2016.
2016 IN Population: 6,633,053
2015 ZIP Code 47102 Population: 7,540
Percent of Opana® ER Dispensed
Austin and Indiana, 2010-2016

ZIP Code 47102 (Austin, IN) (2015 population 7,540)
Indiana (2015 population 6,619,680)
Dispensed Opana® ER Doses Per Capita
ZIP Code 47102 (Austin, IN) and Indiana

Data Notes: 2016 population estimates are currently unavailable for 47102. 2015 population estimates used for 2016.
2016 IN Population: 6,633,653
2015 ZIP Code 47102 Population: 7,540
Making Progress

Epidemic Curve 2.13.2017
Making Progress