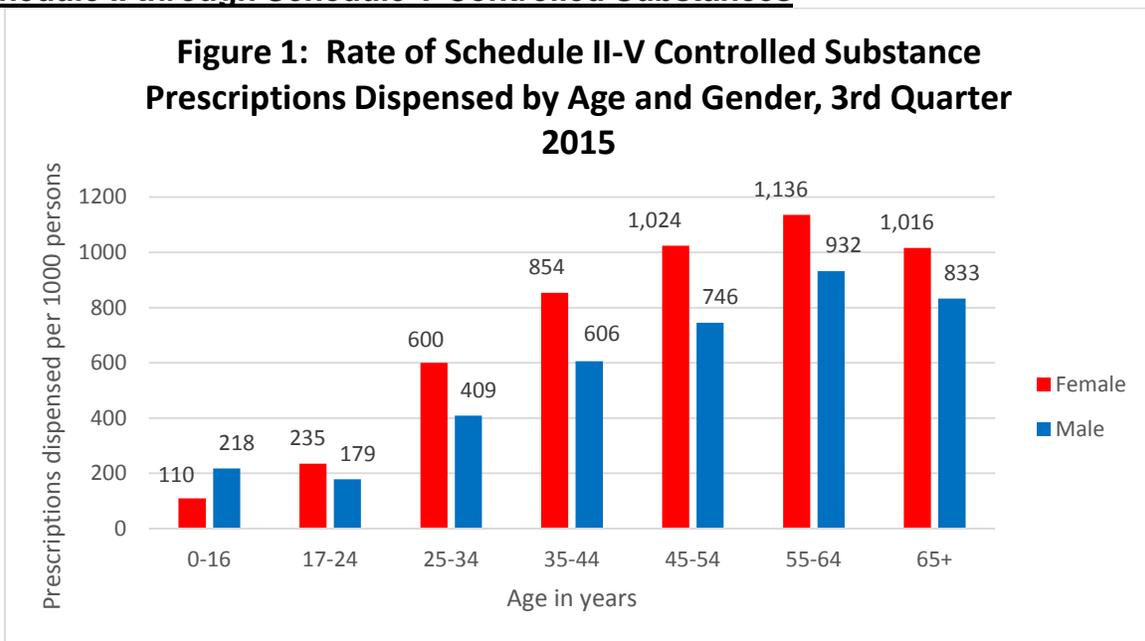


KASPER Quarterly Threshold Analysis Report 3Q 2015

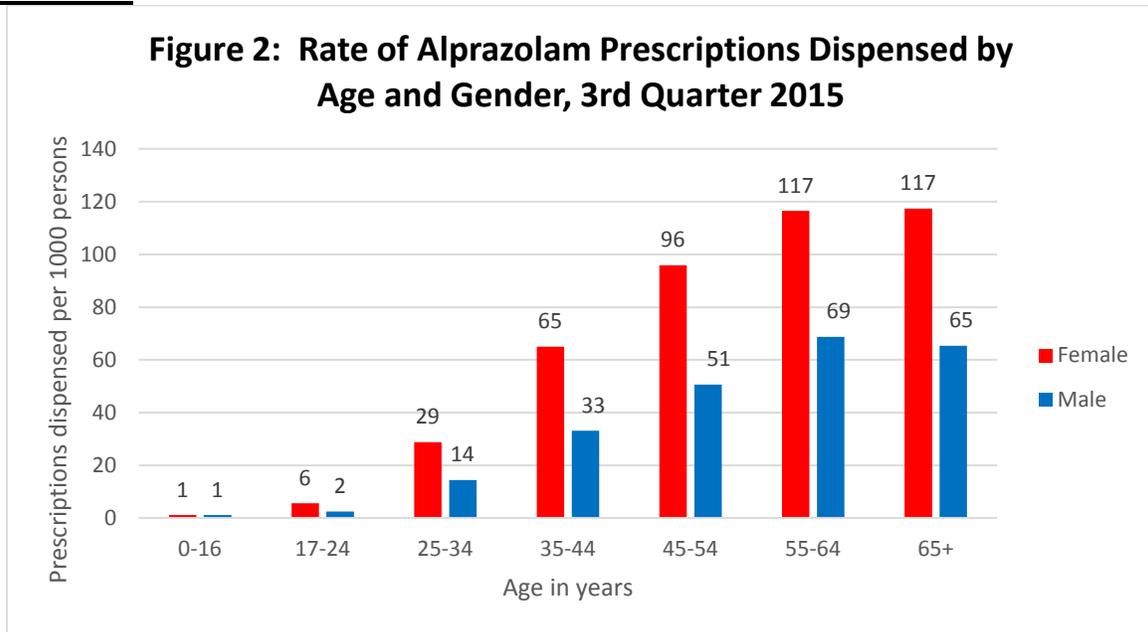
The Kentucky All Schedule Prescription Electronic Reporting System (KASPER) Quarterly Threshold Analysis Report is produced under a *Prescription Drug Overdose Prevention* grant awarded to the Kentucky Injury Prevention and Research Center by the U.S. Centers for Disease Control and Prevention. The report provides information on rates of controlled substance dispensing (number of prescriptions dispensed per 1,000 Kentucky residents) by age group and gender based on KASPER controlled substance dispensing data. The analysis includes rates of 1) total Schedule II through V controlled substances; 2) alprazolam; 3) buprenorphine/naloxone; 4) hydrocodone; 5) methadone; 6) opioids; 7) oxycodone; and 8) total Schedule II stimulants.

Schedule II through Schedule V Controlled Substances



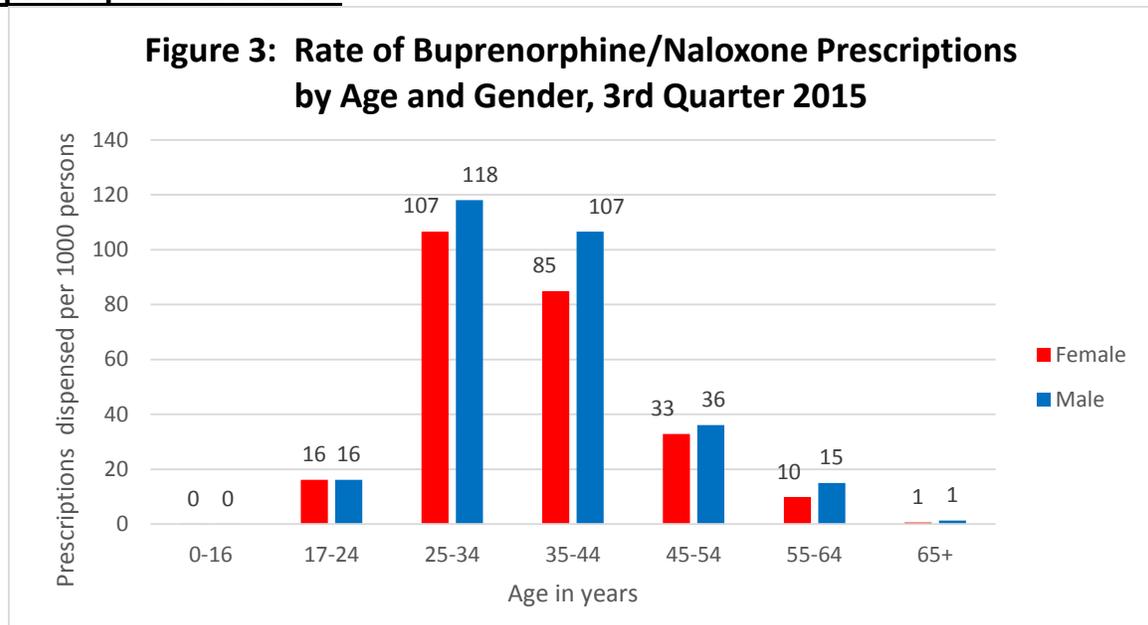
Females in all age groups (except ages 0-16 years) are dispensed controlled substances at higher rates than males in the same age groups. Females, ages 55-64 years, were dispensed 1,136 controlled substance prescriptions per 1,000 females, higher than all other age and gender groups.

Alprazolam



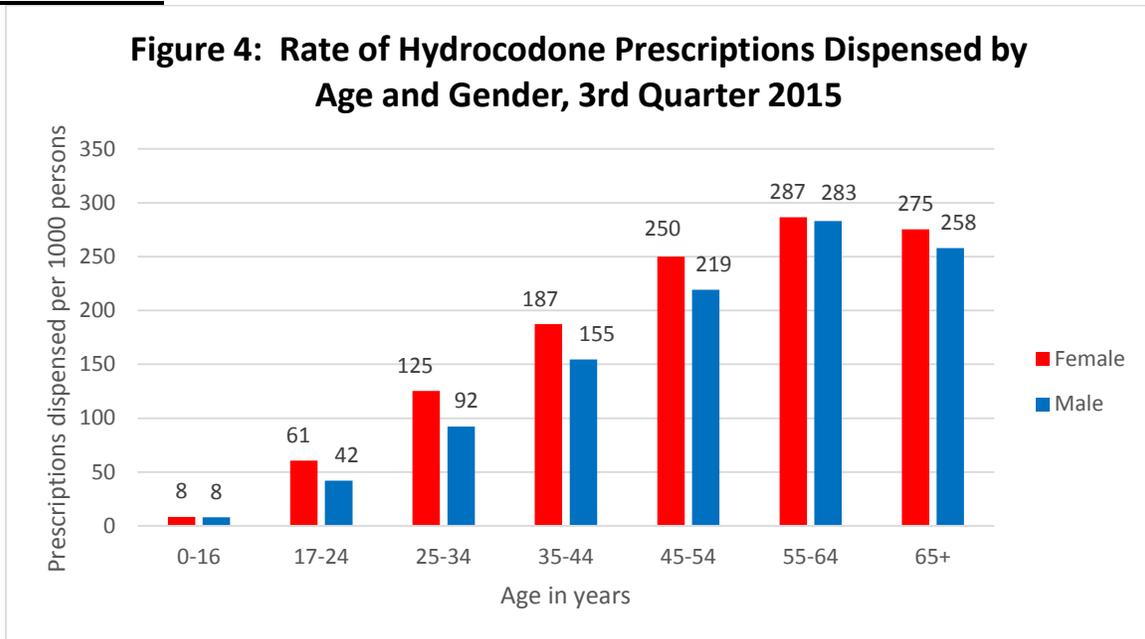
Females, age 25 and older, were dispensed alprazolam at nearly twice the rate of males, age 25 and older. The highest rate of alprazolam dispensed was among females ages 55 and older at 117 prescriptions/1,000 females in this age group.

Buprenorphine/Naloxone



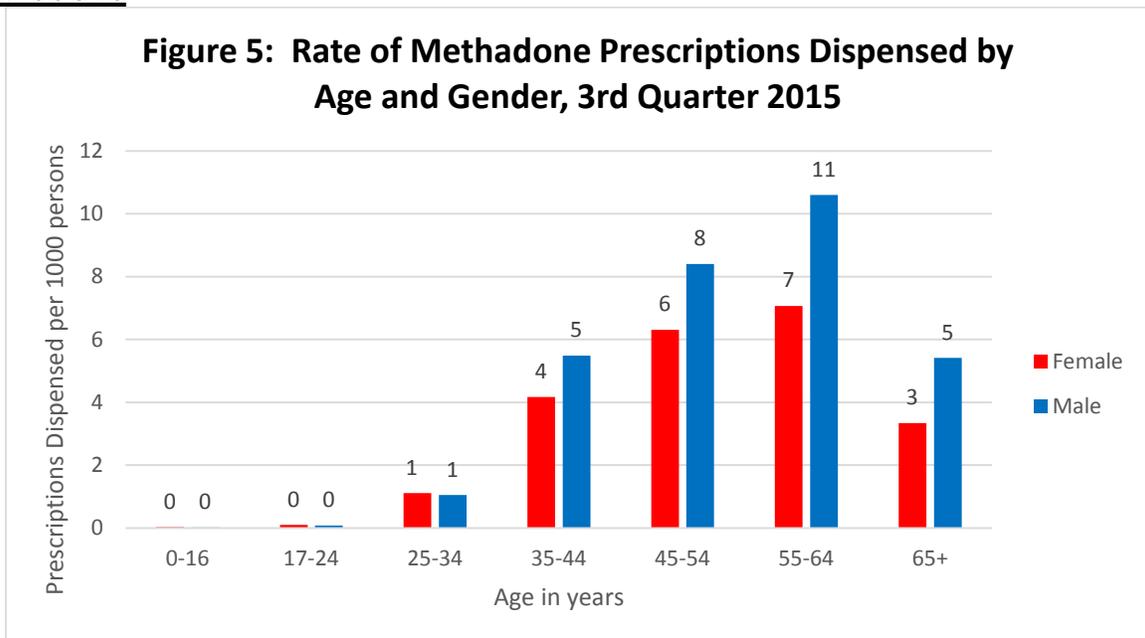
The buprenorphine/naloxone prescription rates for males aged 25 to 64 years were higher than the rates for females of the same age groups. The dispensing rates for males and females aged 25 to 34 years and aged 35 to 44 years were approximately 3 higher than the other age/gender groups.

Hydrocodone



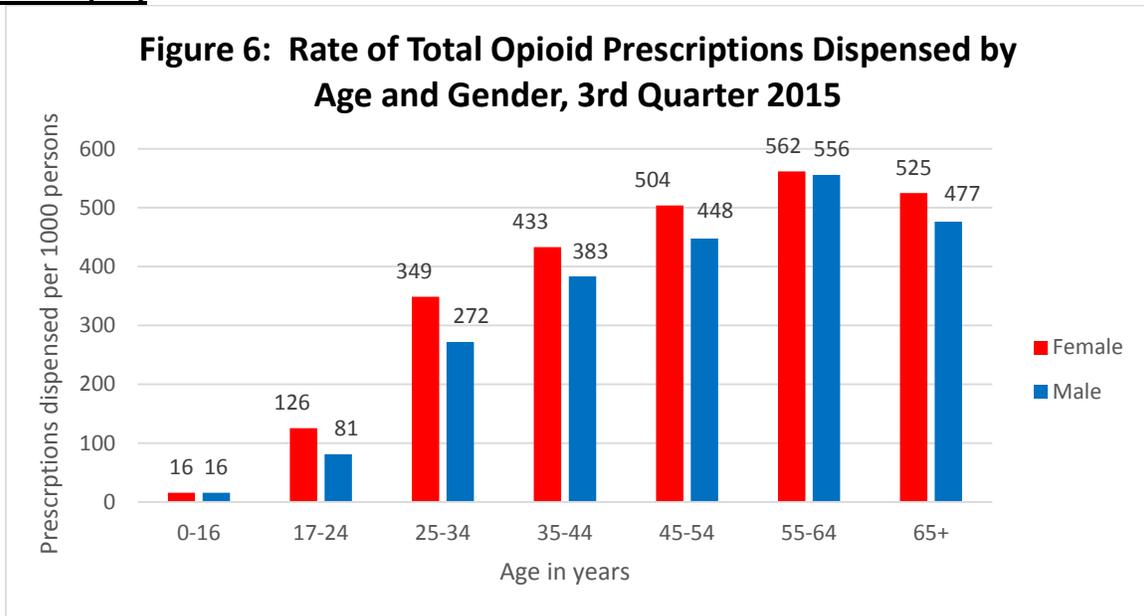
The rate of hydrocodone dispensed was higher for females in all age groups over 17 years of age than males over 17 years of age. Both males and females age 55 to 64 years were dispensed hydrocodone at the highest rates, 283 prescriptions per 1,000 males and 287 prescriptions per 1,000 females.

Methadone



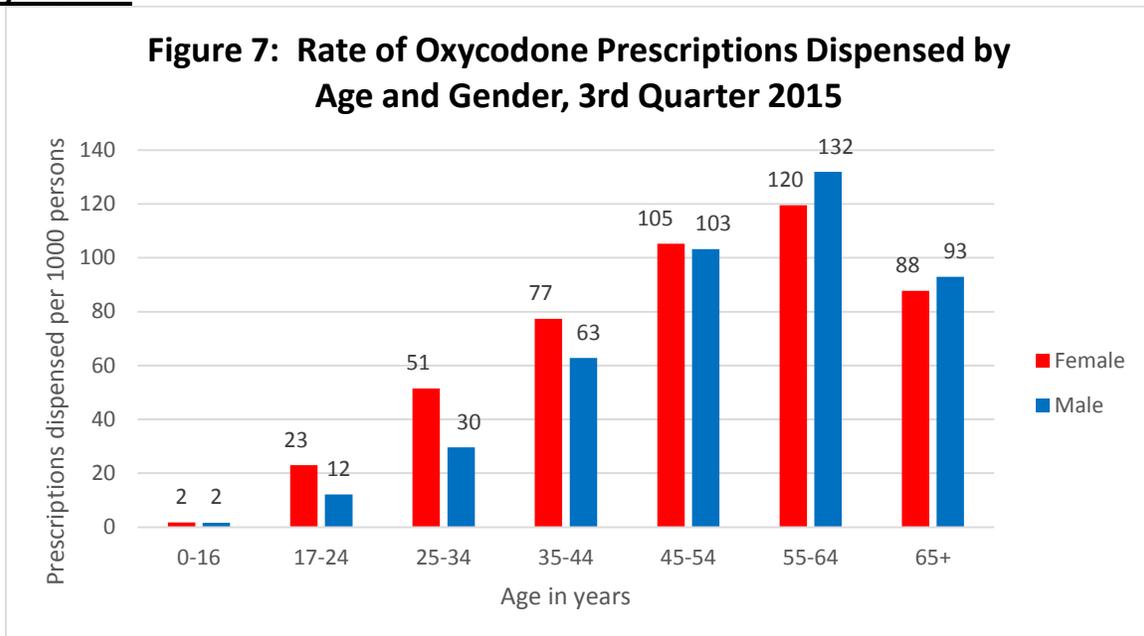
Males aged 35 years and older were dispensed methadone at higher rates than females in the same age group. The highest rate of methadone dispensing was for males aged 55 to 64 years at 11 prescriptions per 1,000 males aged 55 to 64.

Opioids (All)



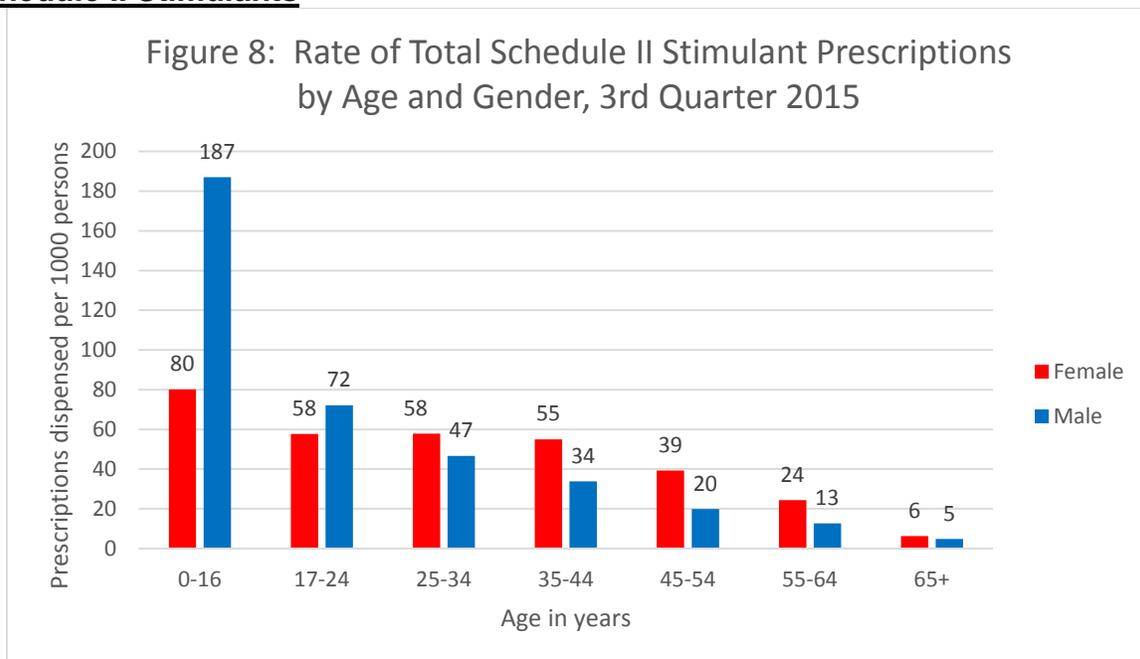
In all age groups 17 years of age and older, females were dispensed opioids at higher rates than males aged 16 and older. The highest dispensing rates were for females and males aged 55 to 64 years at 562 prescriptions per 1,000 females and 556 prescriptions per 1,000 males.

Oxycodone



Females 17 years of age and older were dispensed oxycodone at higher rates than males the same age until age 55 and older. The largest rate difference between dispensing for females and males was in the 25 to 34 year age group where females were dispensed at a rate 1.7 times higher than males.

Schedule II Stimulants



Schedule II stimulants include amphetamine (e.g. Adderall) and methylphenidate (e.g. Concerta, Ritalin). The highest rate of dispensing Schedule II stimulants was for males aged 0 to 16 at 187 prescriptions per 1,000 males. At age 25 and older, the Schedule II stimulant dispensing rate was higher for females than for men.

Your feedback is important to us. Please take a few minutes to evaluate this report. Please click on this link to take you directly to the evaluation survey:
<https://www.surveymonkey.com/r/3Q2015KASPERThresholdReportFeedback>.

This project report is a collaboration between the Kentucky Injury Prevention and Research Center (KIPRC) and the Kentucky Cabinet for Health and Family Services.

This report, and prior reports, is available on the KASPER website at <http://www.chfs.ky.gov/os/oig/kaspertrendreports> and on KIPRC's website at <http://www.mc.uky.edu/kiprc/>.