Prescription drug dependency is harming pregnant women and their infants at alarming rates. You can be part of the solution.

Retail pharmacy prescriptions for opioids, such as the pain medicines Hydrocodone and Oxycodone, have increased more than 50 percent since 1991, with nearly a quarter of a billion prescriptions filled in 2013.¹ Nationally, the number of pregnant women using opioids increased fivefold from 2000 to 2009, while the number of infants with withdrawal symptoms almost tripled.²

**Neonatal Abstinence Syndrome** (NAS), also known as neonatal withdrawal syndrome, is a set of distressing physical symptoms in infants born to mothers who took opioids or other drugs during pregnancy.

The symptoms for NAS can range from mild to severe and may include:

- Feeding difficulties
- Tremors and irritability
- Vomiting and Diarrhea
- Low birth weight
- Breathing problems
- Seizures

“Physicians have correctly been taught to relieve pain. However, we have swung too far and are now overprescribing narcotics…and contributing to the narcotic addiction epidemic.”

- MICHELE WALSH MD,
  OPQC NEONATOLOGY CLINICAL LEAD

“A Public Health Epidemic

- Every 25 minutes, an infant is born with NAS in the United States.³
- In Ohio, treating infants born with NAS cost almost $100 million & nearly 25,000 inpatient days in 2013⁴
- The rate of NAS in Ohio grew almost 800% from 2004 to 2013:

Hospitalization Rates for Babies with NAS in Ohio, 2004 to 2013 (Rate per 10,000)

Source: Ohio Hospital Association

“If only someone had told me how just a tiny little pill could lead to my horrible heroin addiction…it would have saved me and my baby a lot of pain.” — JULIE
How You Can Help Stem the Epidemic in Ohio

Please follow these steps when prescribing opioids to women of reproductive age.

1. **PRESCRIBE SAFELY**
   
   Prescribe minimum amounts of opioids for the shortest duration required to treat acute pain. Look for non-narcotic alternatives for chronic pain.

2. **TALK WITH YOUR PATIENTS ABOUT ADDICTION RISKS AND ABOUT CONTRACEPTIVE OPTIONS**
   
   Ask your patient about their health history or family history with addiction. Also, ask if she is on birth control and suggest a long-acting reversible contraception (LARC).

3. **CONSULT THE OHIO AUTOMATED RX REPORTING SYSTEM (OARRS) PRIOR TO WRITING OPIOID PRESCRIPTIONS**
   
   Ohio state law requires, with limited exceptions that prior to writing opioid prescriptions, the prescriber must request patient information from OARRS. Using OARRS offers insight into a patient’s use of opioids and other controlled substances. OARRS also alerts prescribers to medication conflicts and signs of abuse, addiction or diversion.

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