

# OSAM-O-Gram

## Ohio Substance Abuse Monitoring Network

"Opana®"

January 2012

### Increase in Use and Availability of Opana®



John R. Kasich, Governor  
Orman Hall, Director

As of the January 2012 *Surveillance of Drug Abuse Trends in the State of Ohio* report produced by the Ohio Substance Abuse Monitoring (OSAM) Network, every region in Ohio has reported an increase in the use and availability of Opana®. Opana's psychoactive ingredient is oxymorphone, a Schedule II, semi-synthetic pharmaceutical opioid that has high potential for abuse. Many participants have reported that Opana® has become popular as a replacement for OxyContin® because it is easy to use intravenously. A participant reported, "I know a lot of people, especially heroin users, who use it [Opana®], and I know three people I can call right now who have scripts [prescriptions] for them." Another participant noted, "Opana® has become the new OC's [OxyContin®]." The OSAM Network initially reported on Opana® diversion and abuse in January 2009, at which time Network Regional Epidemiologists noted abuse of Opana® in Cincinnati, Dayton and rural, southeast Ohio.

Law enforcement and treatment providers agree that the increase in popularity of Opana® can be attributed to the reformulation of OxyContin®. In past reporting periods, the most common and desired prescription opioid was OxyContin®. With the reformulation of OxyContin® to an abuse-deterrent tablet, there has been a drastic decrease in both the use and availability of the drug in its original formulation. A treatment provider noted, "It was oxy's [OxyContin®] for a long time [that was most widely used], but now it's Opana®. Every client I've seen in the last few months has been using Opana®." The Bureau of Criminal Investigation (BCI) Bowling Green Crime Lab reported that the number of prescription opioid cases it processes has generally remained the same during the past six months; a noted exception is an increase in oxymorphone.

Oxymorphone was introduced to the U.S. market as an analgesic in 1959. In 2006, the U.S. Food and Drug Administration approved the manufacture of oxymorphone in immediate-release (Opana®) and extended-release (Opana® ER) tablet forms. Opana® is available in 5- and 10-milligram tablets. Opana ER® is available in 5, 7.5, 10, 15, 20, 30 and 40-milligram tablets. Oxymorphone is prescribed when the use of opioids is appropriate in treating moderate to severe chronic or acute pain. Based on estimates of similar oral doses for pain management, oxymorphone is more potent than hydrocodone, oxycodone or morphine.

Current street jargon includes many names for Opana®. Reportedly, the most common street names are "bears," "pana's," "pandas" and "panda bears." Due to high demand, Opana® currently sells for \$1-2 per milligram.

Throughout the state, prescription opioids remain highly available. In the June 2011 OSAM Network report, the increase in the availability of opioids was attributed to their easy access by prescription. Since the June 2011 report, there has been a slight decrease in availability of prescription opioids in the Akron-Canton, Columbus and Dayton regions. This decline in availability can be attributed to the high cost of these drugs, closing of physicians' offices known to liberally prescribe them, and the rise in popularity of heroin. Participants in these three regions agreed that it is now more difficult to obtain prescription opioids than to obtain heroin. Participants throughout regions reported a drastic decrease in availability of the original formulation of OxyContin® OC.



Department of Alcohol &  
Drug Addiction Services



Ohio Substance Abuse  
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