

Why does Tennessee have such high rates of NAS³?

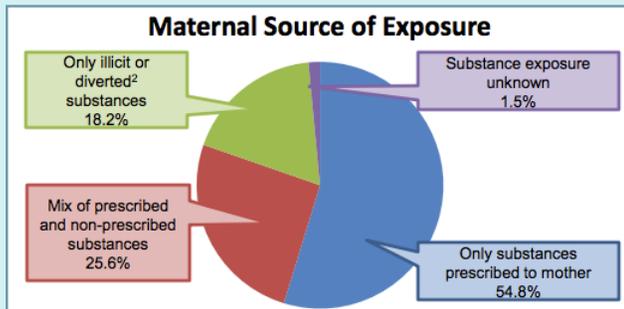
- Doctor shopping.
- The rise of “Pill Mills.”
- Between 1999 and 2013, the amount of prescription opioids distributed in the US nearly quadrupled.
- As of 2012, there are between 96-143* painkiller prescriptions per 100 people.

* Meaning that one person may have multiple prescriptions filled at a time.

Most Commonly Abused Drugs Related to NAS¹

- Benzodiazepines
 - Diazepam
 - Clonazepam
- Opiates/Narcotics
 - Heroin
 - Methadone
 - Codeine
 - Fentanyl

How Mothers Access Drugs



References

¹https://www.tn.gov/assets/entities/health/attachments/NAS_FAQ.pdf

²Ebert, J. (2016, March 22). Tennessee Law that punishes mothers of drug-dependent babies to end. The Tennessean. Retrieved from <http://www.tennessean.com>

³McPheeters, M. (2016) Addressing the opioid epidemic in Tennessee. Retrieved from www.tnpublichealth.org

⁴https://www.tn.gov/assets/entities/health/attachments/June_2016_-_NAS_Monthly_Update.pdf

⁵<https://www.tn.gov/assets/entities/tenncare/attachments/TennCareNASData2015.pdf>

⁶Wallace, H.S. (2014) Drug exposed infants & their mothers: societal costs and implications. Unpublished manuscript, Department of Child and Family Studies, University of Tennessee, Knoxville, Tennessee.

⁷<https://www.tn.gov/health/topic/nas>

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Programs in agriculture and natural resources, 4-H youth development, family and consumer sciences, and resource development. University of Tennessee Institute of Agriculture, U.S. Department of Agriculture and county governments cooperating. UT Extension provides equal opportunities in programs and employment.

Neonatal Abstinence Syndrome in Tennessee:

What Can We Do About It?

A Guide for Professionals



Current as of December 2017

What is NAS?

Neonatal abstinence syndrome (NAS) is a condition in which a baby is exposed to certain substances during pregnancy. The baby becomes dependent while in the womb and then suffers from withdrawals after birth.¹

Infants' Symptoms Include:¹

- Vomiting and diarrhea.
- Excessive or high-pitched crying.
- Constant movement.
- Difficult to console.
- Sneezing and coughing.
- Fever.
- Feeding difficulties.
- Tremors and seizures.
- Rapid breathing.
- Sweating.

*Symptoms vary based on drug type, how the mother's body breaks down the drug, the amount and frequency of the drug, and the length of gestation.¹

*Symptoms can last between one week and six months.¹



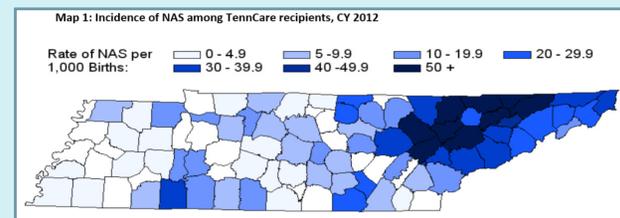
Statistics

Prevalence in Tennessee:

- State rate: 12.8/1,000 live births.⁴
- Highest rate: Sullivan County, 57/1,000 live births.⁴
- Lowest Rate: Shelby County, 0.2/1,000 live births.⁴
- In 2014, TennCare infants with NAS were 18 times more likely to enter state custody than infants without NAS.⁶
- The number of NAS babies increased tenfold between 2000 and 2010 in Tennessee.⁷

Costs⁵

	TennCare Paid Live Births (2011)	NAS Infants (2011)
Number of Births	45,205	528
Cost for Infant in First Year of Life	\$33,249,612	\$350,936,293
Average Cost Per Child	\$7,763	\$62,973
Average Length of Stay (Days)	4.8	32.5



What if you suspect a pregnant woman is using/abusing drugs?

- Encourage her to seek pre- and postnatal care.
- Assure her that she will not be penalized for seeking prenatal care or rehabilitation services.
- The law that punished new mothers for drug-dependent babies is no longer in effect; she will not go to jail!²



Prevention¹

Primary: Reduce likelihood that women taking narcotics will get pregnant.

- Discuss family planning options and harmful effects of non-prescribed drugs while pregnant.
- Provide prescriber education:
 - Reduce inappropriate prescribing and dispensing of opioids.
 - Follow recommended guidelines for prescribing opioids.
 - Prescribe lowest effective dose.
 - Consider non-opioid treatment for chronic pain.
- Target outreach/education for women at risk.

Secondary: Ensure pregnant women who are taking narcotics receive proper care.

- Identify pregnant women who are using drugs early in their pregnancy.
- Provide early and regular prenatal care.
- Develop treatment programs that are safe and comfortable for those seeking treatment.
- Consider medication-assisted therapy to lessen severity of withdrawal.