#### Hospitalizations for Infective Endocarditis Among Individuals Using Opioids in Philadelphia, 2008-2015

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## Background

Number of unintentional drug overdoses and homicides – Philadelphia, 2003-2016



#### **Overdose Deaths are Tip of the Iceberg**



Hospitalizations

**Emergency Department Visits** 

**Treatment Admissions** 

People who misuse/are dependent

People receiving >1 opioid prescription per year

# Infective Endocarditis (IE)

- Infection caused by bacteria that enter bloodstream and settle the lining of the heart's chambers or valves
- Risk factors:
  - Congenital heart defects
  - Acquired valve abnormalities
  - Injection drug use



# Infective Endocarditis (IE) & Injection Drug Use (IDU)

- IE is a potentially fatal consequence of IDU
- ~16% of IE in North America attributed to IDU
- Estimated that between 5% and 20% of PWID have had IE
- People with IDU related IE have worse outcomes than non-IDU related IE
  - Higher mortality
  - Increased frequency of repeat IE

#### Infective Endocarditis (IE) & Drug Use

#### • Mechanism:

- Direct injection of bacteria into the blood stream
- Bacteria spread from skin and soft tissue infections into bloodstream
- Causes:
  - Drug solution may contain particulate matter (i.e. talc) that damage cardiac valves
  - Poor injection hygiene
  - Injecting with unsterile equipment
  - Injecting contaminated drug solutions



To assess trends in rates of infective endocarditis among individuals using opioids in Philadelphia

# Methods

- Inpatient hospitalization discharge records for Philadelphia and surrounding counties
  - Pennsylvania Health Care Cost Containment Council (PHC4)
- Philadelphia Residents Only
- Time period: 2008-2015
- Limited to those between 15-64 years old
- Looked for endocarditis and opioid poisoning, dependence, or abuse related diagnoses
- Co-infection with:
  - HIV
  - HCV
  - HBV



Indicator	ICD-9-CM	ICD-10-CM
Endocarditis	421.0 421.1 421.9 424.9	33.0  33.9  38  39
Opioid overdose or dependence	304.00 - 304.03 304.7 305.00 - 305.03 965.00 965.01 965.02 965.09 E850.0 - E850.2	F11 T40.0X[1-4] T40.1X[1-4] T40.2X[1-4] T40.3X[1-4] T40.4X[1-4] T40.60[1-4] T40.69[1-4]
HIV	042 V08 079.53 795.71	B20 Z21 B97.35
HCV	070.41 070.44 070.51 070.54 070.70 070.71 V02.62	B17.1 B18.2 B19.2 Z22.52
HBV	070.2 070.3 V01.61	B16 B18.0 B18.1 B19.1

## Results

- 2552 cases of IE
  - 604 (23.7%) had co-occurring opioid use diagnoses
- Co-infection with opioid use and IE
  - 46.7% with Hepatitis C
  - -6.1% with HIV
  - 2.8% with Hepatitis B



#### Rate of Co-occurring Opioid Use and Endocarditis (per 100,000 Philadelphia residents)



# **Demographics of IE**

	Opioid Use Diagnosis (N=604)	No Opioid Use Diagnosis (N=1948)	
Age			
15-17	0%	0.2%	
18-24	12%	4%	
25-34	37%	9%	
35-44	26%	17%	
45-54	15%	34%	
55-64	10%	35%	
Sex			
Male	53%	60%	
Female	47%	40%	
Race/ethnicity			
White, non-Hispanic	59%	30%	
Black, non-Hispanic	20%	57%	
Hispanic	7%	5%	
Other	11%	5%	
Unknown	2%	3%	
Insurance Paver			
Private	6%	22%	
Public	90%	76%	
Self-Pay/Charity	4%	2%	
Unknown	0.2%	0.5%	

IE and Opioid Use Diagnosis

- Greater for those between ages of 25-44 years
- Equally distributed between males and females
- Greater for white, non-Hispanic Individuals
- Greater for those with public insurance

## **Discharge Status for IE**



Opioid Use Diagnosis
No Opioid Use Diagnosis

## Limitations

- Reliant upon hospital discharge records
  - ICD-9-CM/ICD-10-CM coding subject to misclassification or coding errors
  - Patients may not have disclosed drug use during stay
  - Can't identify a causal association between opioid use and endocarditis
  - Can't distinguish route of drug administration (i.e. oral, injection, insufflation)
  - Only generalizable to people who seek care in Philadelphia and surrounding county hospitals

### Harm Reduction Prioritization

- Needle and syringe exchange programs
- Education on safe injection practice





## Thank you!

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