Opioid Dispensations to First Nations people in Alberta

Opioid drug dispensation rates by age group, sex, and First Nations status, Alberta, 2011-2015

Opioid drugs are commonly used to decrease the sensation of pain. Common examples of opioid drugs include oxycodone, morphine, fentanyl, and codeine. The long-term use of these opioids can potentially lead to tolerance where an increased dose is required to have a similar pain relieving effect. Opioids can be fatal in overdose; the recent spike in overdose deaths in Alberta appears to be mostly due to illicitly sourced fentanyl (that is, non-prescribed).

In today’s edition of First Nations–Health Trends Alberta,¹ we provide age-specific rates for a first dispensation of an opioid drug among First Nations and non-First Nations people separately. Age-specific rates are averaged over 5 years (2011 to 2015). The Pharmaceutical Information Network (PIN) was used to obtain information on opioid drugs dispensed from community pharmacies in Alberta.

Opioid dispensation rate is two times higher for First Nations compared to non-First Nations

Overall, there was an annual average of 30,000 First Nations and 380,000 non-First Nations peoples who had at least one dispensation of any opioid drug between 2011 and 2015. The overall opioid dispensation rate over this time period was two times higher for First Nations (187 per 1000 population) compared to non-First Nations peoples (98 per 1000 population). The difference in dispensation rates was greatest at the ages of 25 to 49 years (three times higher for First Nations).

Females had generally higher opioid dispensation rates than males across all ages. Higher rates among females and differences in dispensation rates between First Nations and non-First Nations were also observed by opioid type (oxycodone, morphine, and fentanyl). The morphine dispensation rate was 2.8 times higher among First Nations females and males 40 to 59 years old (Females: 1,414; Males: 1,077 per 100,000 population) compared to non-First Nations (Females: 496; Males: 398 per 100,000 population). Also, First Nations males 90 years and older were not dispensed oxycodone or fentanyl. Note that these results cannot be generalized to a specific First Nation community. Also note that there is geographic variability in opioid dispensation events; which will be reported in a future FN-HTA.

¹ This is the 8th in a series of First Nations-specific Health Trends compiled in collaboration by Alberta Health and the Alberta First Nations Information Governance Centre (AFNIGC). To suggest future topics, please contact the AFNIGC (communications@afnigc.ca; 403-539-5775).