



Protecting Our Infants Act of 2015 (S. 799/H.R. 1462)

The Protecting Our Infants Act of 2015 would direct federal agencies to collect and disseminate strategies and best practices to prevent and treat maternal opioid use and abuse, as well as provide recommendations for diagnosing and treating babies suffering from withdrawal. The March of Dimes urges Members of Congress to co-sponsor and support passage of this critical bill.

Background

- Opioid prescription rates have risen dramatically over the past several years. According to the Centers for Disease Control and Prevention (CDC), in some states, there are as many as 96 to 143 prescriptions for opioids per 100 adults per year.
- In recent years, there has been a steady rise in the number of overdose deaths involving heroin. According to CDC, the death rate for heroin overdose doubled from 2010 to 2012.
- Neonatal abstinence syndrome (NAS) refers to cases in which newborns experience drug withdrawal shortly after birth due to drug exposure in utero. In the case of opioids, NAS can result from the use of prescription drugs as legitimately prescribed, from the abuse of prescription drugs, or from the use of illegal opioids like heroin.
- Efforts to address NAS should span the entire continuum of care, from improving preconception health to optimizing treatment for both mother and infant after birth.

Key Bill Provisions

- S. 799/H.R. 1462 directs the Agency for Healthcare Research and Quality to conduct a study and develop recommendations for preventing and treating prenatal opioid abuse and NAS.
- The bill directs the Department of Health and Human Services to develop a strategy to address research and program gaps, which includes determining the most appropriate treatment for pregnant women with opioid use disorders, discerning the most appropriate treatment and management of infants with neonatal abstinence syndrome, and cataloguing the long-term effects of prenatal opioid exposure on children.
- The bill authorizes CDC to provide technical assistance to states to improve the availability and quality of data collection and surveillance activities regarding NAS.

Opioid Drug Exposure Facts

- Between 2000 and 2009, the number of mothers found to be using opioids during pregnancy increased from 1.19 to 5.63 per 1,000 US hospital births.
- In that same time period, NAS diagnoses increased from 1.20 to 3.39 per 1000 hospital births per year.
- Babies with NAS are more likely than all other hospital births to be born at low birthweight and to have respiratory complications, feeding difficulties, and seizures.
- The average cost of treatment in a hospital for NAS increased from \$39,400 in 2000 to \$53,400 in 2009. A large proportion of these costs are borne by the Medicaid program.

Contact information:

Diane Wilkinson
dwilkinson@marchofdimes.org
 202-659-1800