

Opioid Use Disorder Among Women

The opioid crisis affects people across all racial and ethnic groups, socioeconomic backgrounds and geographical locations. Historically, men have experienced higher rates of opioid use disorder than women. In recent years, that gap has narrowed.

Effects After Birth

The rise of opioid use disorder among pregnant women has led to a significant increase in the number of babies born with symptoms of opioid withdrawal. This condition is known as neonatal abstinence syndrome or (NAS). In Minnesota, nearly 2,000 infants were diagnosed from 2012 to 2016.⁵ Neonatal abstinence syndrome can look different for every baby, but most signs and symptoms appear within the first 72 hours of birth and can last from a week up to six months.

Possible birth complications associated with risky opioid use during pregnancy ⁶

- Low birthweight
- Jaundice
- Extensive time in the NICU-post birth
- Additional medicinal treatment

Effects on Women

Opioids and other synthetic drugs affect women differently than men. Women typically display a faster onset and progression of problem use after first exposure compared to men, according to the publication, Psychiatric Clinics of North America. In addition, women experience greater impairment in social functioning under the influence of opioids.¹

Women are also less likely than men to enter treatment for opioid use disorder and tend to have difficulty achieving long-term recovery. This may be due to the fact that women are often the primary caretakers for children and require additional support beyond treatment, such as childcare, housing, transportation and more.²

If a woman with opioid use disorder becomes pregnant, the substance could negatively affect her child. In fact, risky opioid use among pregnant women has risen dramatically in the last 20 years.

Women aren't just at risk during pregnancy. New mothers face challenges once their child is born, such as difficulty accessing specialized resources and the stigma of having exposed a child to substances. Women who were undergoing medication-assisted treatment (MAT) during pregnancy are also significantly more likely to discontinue once giving birth, leading to an increased rate of opioid overdoses.⁴

Common signs and symptoms of neonatal abstinence syndrome ⁶

- Tremors, seizures and overactive reflexes
- Fussiness, excessive crying or having a high-pitched cry
- Poor feeding, sucking or low weight gain
- Breathing problems
- Fever, sweating or blotchy skin
- Trouble sleeping and excessive yawning
- Diarrhea or throwing up
- Stuffy nose or sneezing

Prevention

Opioid use disorder can occur even when opioids are properly prescribed and taken responsibly. No one intends to develop a dependence on opioids and other synthetic drugs, but it can happen naturally given the nature of the drug.

If you are pregnant and are struggling with opioid use, be open with your provider. Make sure anyone who prescribes you an opioid knows you're pregnant. If you do develop a problem, they can help you start medication-assisted treatment (MAT), which can prepare you for treatment once your baby is born.⁷

Year	Number of babies born in Minnesota dependent upon opioids because of a mother's use during pregnancy
2012	236
2013	326
2014	396
2015	479
2016	402
	1,839

(Minnesota Department of Health)

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- 1 Substance Abuse in Women (Psychiatric Clinics of North America)
 - 2 Epidemiology of Substance Use in Reproductive-Age Women (Obstetrics and Gynecology Clinics of North America)
 - 3 Opioid Use Disorder Documented at Delivery Hospitalization (Centers for Disease Control and Prevention)
 - 4 Medication Assisted Treatment Discontinuation In Pregnant and Postpartum wWomen with Opioid Use Disorder (Drug and Alcohol Dependence Journal)
 - 5 Neonatal Abstinence Syndrome Data Brief (Minnesota Department of Health)
 - 6 Neonatal Abstinence Syndrome (March of Dimes)
 - 7 Treating Opioid Use Disorder During Pregnancy (National Institute on Drug Abuse)