Opioid Overdose Death - Comparing Maryland's Neighboring States

State	Publicly-Shared Overdose Data	Report Link	Opioid Overdose Deaths (public)	Notable Shifts/Observations
Maryland	2017 full report published July 26, 2018 2018 Q1 report published July 26, 2018	2017 Maryland Drug and Alcohol Intoxication (Dept. of Health) Preliminary 1st Quarter 2018 - Maryland Drug and Alcohol Intoxication (Dept. of Health)	2017 • 2,009 all opioid- related deaths • +8% from 2016	 Eighty-eight percent of all intoxication deaths that occurred in Maryland in 2017 were opioid-related The number of opioid-related deaths increased by 8% between 2016 and 2017, substantially less than the 70% increase between 2015 and 2016. Non opioid-related drug deaths have also been increasing, but at a slower rate. Large increases in the number of fentanyl-related deaths were responsible for the overall rise in opioid-related deaths. Between 2016 and 2017 the number of fentanyl-related deaths increased by 42%. The number of heroin-related deaths declined by 11%, and the number of prescription-opioid related deaths decreased by 1%. Heroin-related deaths decreased among all age groups, race/ethnicities, and among both men and women in 2017 Seventy-eight percent of heroin-related deaths in 2017 occurred in combination with fentanyl, 32% in combination with cocaine, 19% in combination with alcohol, and 15% in combination with prescription opioids. The number of prescription opioid-related deaths had been rising since 2012, but declined slightly in 2017. There were an average of 29 deaths have been increasing rapidly since 2013, increasing 42% between 2016 and 2017. There were an average of 29 deaths have increased substantially among all age groups, among Whites and Blacks, among both men and women, and in all regions of the State. Fifty-three percent of fentanyl-related deaths in 2017 occurred in combination with alcohol Deaths related to carfentanil (a fentanyl analog) were first identified in 2017, testing began in 2016. There were 60 carfentanil-related deaths in 2017.



Virginia	2017 full report Published Apr 2018 (with a caveat that cases remain open)	<u>Virginia OCME-</u> <u>4th Quarter 2017</u>	2017 • 1,227 all opioid-related deaths • +8% from 2016	 From 2016 to 2017, there was an increase in overdose deaths for cocaine, fentanyl, heroin, methamphetamine, and prescription opioids. However, there was a decrease in overdose deaths for benzodiazepines. In 2015, [2016 and 2017] statewide, the number of illicit opioids deaths surpassed Rx opioid deaths. Rural areas of Virginia have the highest mortality rates due to Rx opioids Urban areas have the highest mortality rates due to illicit opioids Virginia experienced the largest increase (38.9%) in the number of fatal overdoses on record in 2016 compared to 2015. 2017 numbers surpassed those of 2016, [however] the rate of change (7.5% increase) was not as significant as that seen in 2016 compared to 2015.
DC	2017 full report Published Jan, 2018 (with a caveat that cases remain open)	<u>DC OCME</u> <u>Opioid-related</u> <u>Fatal Overdoses</u> <u>Report: 2014 –</u> <u>2017</u>	2017 • 473 all-opioid-related deaths • +14% from 2016	 From 2016 to 2017, there was an increase in overdose deaths for Fentanyl, P-fluoroisobutyryl Fentanyl, the total number of prescription opioids, Oxycodone, Hydrocodone, Hydromophine, Buprenorphine, and Methadone From 2016 to 2017, there was a decrease in overdose deaths for opiates, morphone, heroin, codeine, Oxymorphone, Furanyl Fentanyl, Despropionyl and Fentanyl
Delaware	2017 full report Published prior to June 2018	<u>Delaware</u> <u>Forensic Science</u> <u>2017 Annual</u> <u>Report</u>	 <u>2017</u> 348 all accidental drug & alcohol overdose deaths +12% from 2016 *Broken down by substance, but all-opioid data not reported* 	 From 2016 to 2017, there was an increase in overdose deaths for heroin, fentanyl, and cocaine. There seems to be a decrease in prescribed medication related deaths. However this data is not entirely clear since the 2016 report does not distinguish opioid prescriptions vs non-opioid prescriptions. Statewide, deaths from drug and alcohol intoxication increased by 12% from 308 in 2016 to 348 in 2017



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West Virginia	2017 preliminary Released to media April, 2018 (with a caveat that cases remain open) 2016 full report Published December, 2017	<u>Charleston</u> <u>Gazette - WV</u> <u>overdose deaths</u> <u>set record in</u> <u>2017</u> <u>2016 Overdose</u> <u>Fatality Analysis</u>	 <u>2017</u> 909 all overdose-related deaths +2.4% from 2016 *opioid-specific data not reported* 	 From 2016 to 2017, there was an increase in overdose deaths for fentanyl, methamphetamine, amphetamine, and cocaine. From 2016- 2017, there was a decrease in overdose deaths for heroin.
Pennsylvania	2016 full report Published July, 2017	<u>Analysis of</u> <u>Overdose Deaths</u> <u>in Pennsylvania,</u> <u>2016</u>	*2017 data not public* 2016 • 4,642 all overdose- related deaths • +37% from 2015 • *opioid-specific data not reported*	 In 2016, "The presence of an opioid, illicit or prescribed by a doctor, was identified in 85% of drug-related overdose deaths." In 2016, "Fentanyl and fentanyl–related substances were the most frequently identified in decedents (52% of deaths)" Heroin was the second most frequently identified substance (45% of deaths); Benzodiazepines (33% of deaths); cocaine (27% of deaths); Prescription opioids (25% of deaths). In 2016, individuals aged 15-24 saw a 380% increase in the presence of fentanyl in toxicology reports compared to other age groups. In 2016, individuals in the 25- 34 age group experienced a 970% increase in instances of heroin present in toxicology reports compared to other age groups. The percent increase in drug-related overdose deaths between 2015 and 2016 was larger in rural counties (42%) compared to urban counties (34%). Males were more likely to die from a fentanyl and/or heroin overdose compared to females. Females were more likely to have alprazolam, clonazepam, and/or oxycodone present in overdose deaths. In 2016, 77% of decedents were White, 12% were Black, 4% were Hispanic, and 7% were identified as Other, consistent with 2015 and the population distribution across Pennsylvania. From 2015 to 2016, there was an increase in overdose deaths for Fentanyl, Cocaine, Benzodiazepines, Heroin, and Prescription Opioids.

