

FRASER HEALTH TOXIC DRUG RESPONSE PUBLIC REPORT

January – June 2024

<http://www.fraserhealth.ca/overdose>



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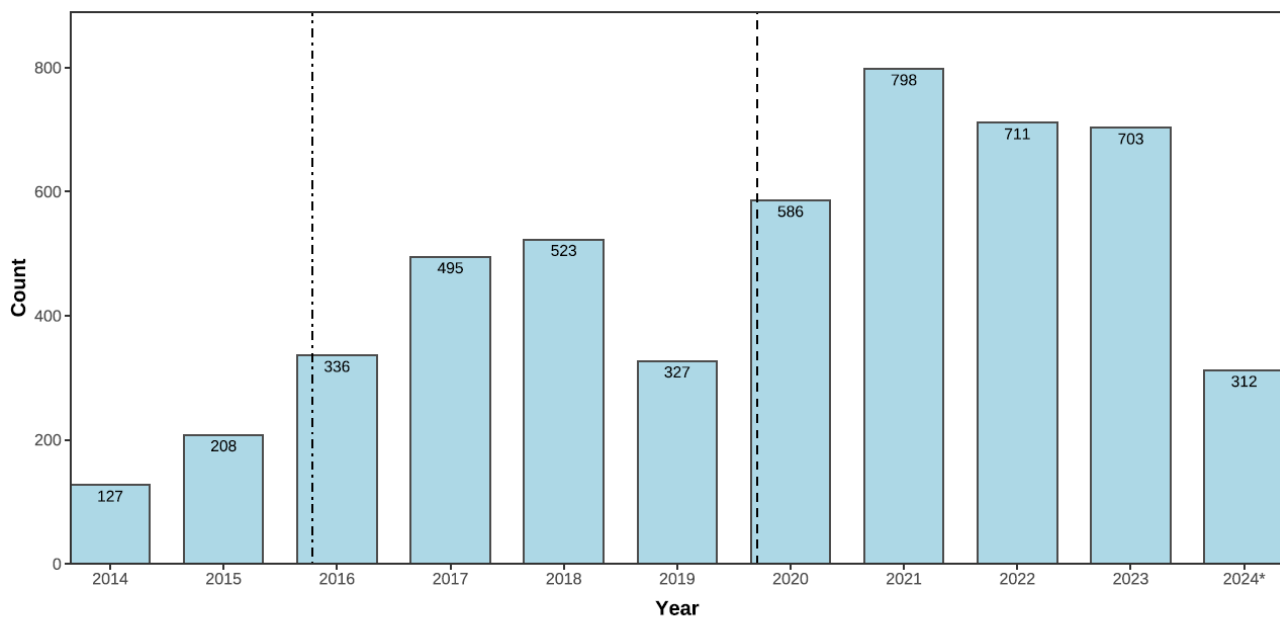
Surveillance Summary

January - June 2024

ILLICIT DRUG TOXICITY DEATHS

- Between January and June 2024, there were 312 illicit drug toxicity deaths in the Fraser Health region.
- In Fraser Health, the number of illicit drug toxicity deaths in 2024 decreased by 11% in comparison to the number of deaths in 2023.

Figure 1: Illicit drug toxicity deaths within Fraser Health, January 2014 to June 2024



Toxic drug supply emergency declared on 14 April 2016 (two dash grey line)
 COVID-19 emergency declared on 17 March 2020 (short dash grey line)

Data source: BC Coroners Service to June 30, 2024.

Preliminary data, numbers subject to change. Numbers include both open and closed cases.

Illicit drug toxicity deaths reported by BC Coroners Service include those involving street drugs (heroin, cocaine, MDMA, methamphetamine, etc.), medications that were not prescribed to the deceased, combinations of the above, with prescribed medications, and where the origin of drug is not known.

*January to June 2024.

Table 1: Illicit drug toxicity deaths within Fraser Health, January 2023 to June 2024

Community**	Jan-Jun 2024	Jan-Dec 2023	% Change 2024* vs. 2023
Fraser East			
Abbotsford	45	91	-1
Chilliwack	11	59	-63
Fraser North			
Burnaby	27	51	6
Coquitlam	13	25	4
New Westminster	14	39	-28
Fraser South			
Langley	25	46	9
Surrey	111	237	-6
Other Fraser Health Communities	66	155	-15
Fraser Health	312	703	-11
BC	1,158	2,569	-10

Data source: BC Coroners Service to June 30, 2024.

Preliminary data, numbers subject to change. Numbers include both open and closed cases.

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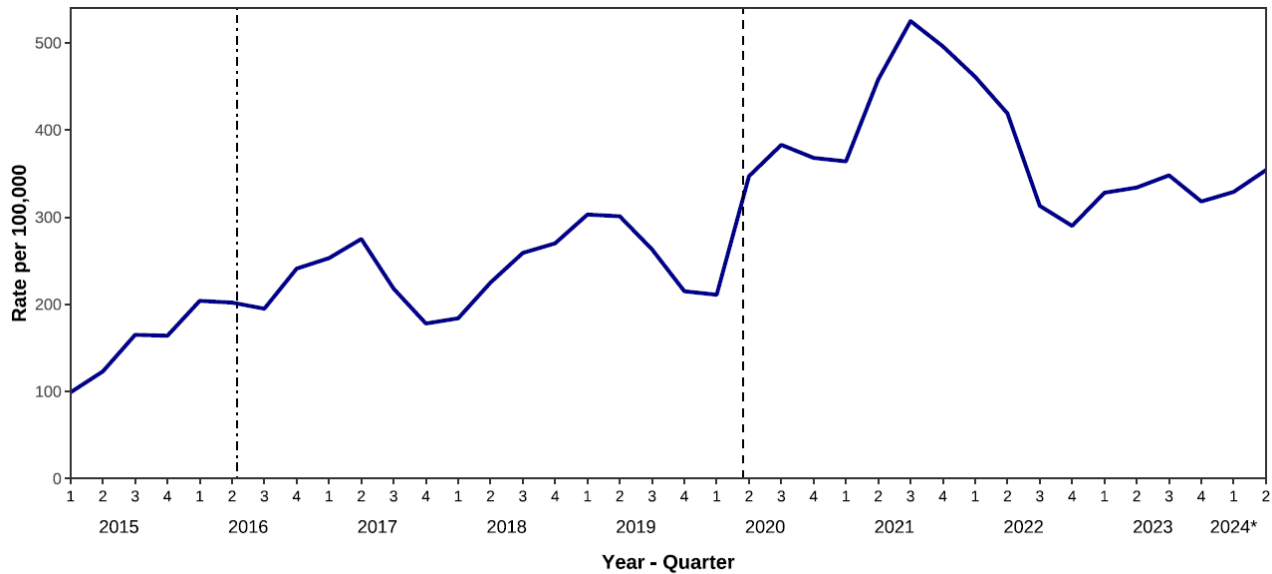
**Community assigned based on location of injury and if that is missing, location of death.

*Year to date; count annualized based on available months for 2024.

PARAMEDIC-ATTENDED TOXIC DRUG POISONING EVENTS

- Between January and June 2024, there were 3,745 paramedic-attended toxic drug poisoning events in the Fraser Health region.
- In Fraser Health, the rate of paramedic-attended toxic drug poisoning events per 100,000 population in 2024 increased by 3% in comparison to the rate in 2023.

Figure 2: Quarterly rate of suspected paramedic-attended drug poisoning events within Fraser Health, January 2015 to June 2024



Toxic drug supply emergency declared on 14 April 2016 (two dash grey line)
 COVID-19 emergency declared on 17 March 2020 (short dash grey line)

Data source: Patient Care Record data from BC Emergency Health Services to June 30, 2024.

Preliminary data, numbers subject to change. Numbers for the most recent month are likely an underestimate and will increase as entry of BC Ambulance Patient Care Form is completed. Numbers may change with data quality and analysis refinements and are not directly comparable to numbers reported previously.

Suspected toxic drug poisoning events include those associated with opioids or other drugs.

*January to June 2024.

Table 2: Suspected paramedic-attended toxic drug poisoning events within Fraser Health, January 2023 to June 2024

Community**	2024			2023		% Rate change 2024* vs. 2023
	Jun (Avg. past 12 months~)	Jan-Jun	Rate per 100,000 Jan-Jun	Jan-Dec	Rate per 100,000 Jan-Dec	
Fraser East						
Abbotsford	107 (89.5)	563	655	990	592	11
Agassiz / Harrison^	5 (<5)	19	328	46	408	-20
Chilliwack	72 (61.3)	397	669	715	624	7
Hope^	<5 (<5)	21	440	61	653	-33
Mission	25 (20.1)	129	494	266	523	-6
Fraser North						
Burnaby	40 (46.6)	277	189	533	188	0
Coquitlam	40 (29.1)	212	244	329	197	24
Maple Ridge	31 (40.2)	234	441	472	461	-4
New Westminster	28 (36.1)	179	394	469	530	-26
Pitt Meadows	<5 (<5)	5	46	35	165	-72
Port Coquitlam	19 (13.1)	93	272	147	219	24
Port Moody / Anmore / Belcarra	<5 (<5)	25	117	48	117	0
Fraser South						
City of Langley	27 (17.8)	128	730	204	607	20
Delta	<5 (9.8)	40	63	139	113	-45
South Surrey / White Rock	15 (10.8)	68	104	129	103	1
Surrey	224 (191.9)	1,248	433	2,203	399	8
Township of Langley	20 (17.8)	107	132	223	144	-9
Fraser Health	665 (598.4)	3,745	341	7,009	332	3

Data source: Patient Care Record data from BC Emergency Health Services to June 30, 2024.

Preliminary data, numbers subject to change. Numbers for the most recent month are likely an underestimate and will increase as entry of BC Ambulance Patient Care Form is completed. Numbers may change with data quality and analysis refinements and are not directly comparable to numbers reported previously.

Suspected toxic drug poisoning events include those associated with opioids or other drugs.

**Community assigned based on location where the paramedics attended the event.

*Year to date; rate annualized based on available months for 2024.

~Average of past 12 months, does not include the most recent month.

^Rates may fluctuate due to small population size.

Counts under five are reported as <5 as they are potentially identifiable.

OVERDOSE PREVENTION & SUPERVISED CONSUMPTION SITES

Please see the Fraser Health website for a list of [overdose prevention sites](#) and [supervised consumption sites](#).

Table 3: Visits and overdoses reversed at overdose prevention sites and supervised consumption sites in Fraser Health, January-March 2024 and April-June 2024

Site Type	Visits for consumption		Overdoses reversed [^]	
	Jan-Mar 2024	Apr-Jun 2024	Jan-Mar 2024	Apr-Jun 2024
Overdose prevention sites*	55,857	60,915	35	29
Supervised consumption sites	2,405	1,987	35	29

Numbers may change with data quality and analysis refinements and are not directly comparable to numbers reported previously.

*Include fixed sites, mobile sites, and housing-based sites.

[^]Among visits for consumption.

DRUG CHECKING

To find a drug checking site near you, please click [here](#).

Table 4: Drug checking volumes in Fraser Health, January-March 2024 and April-June 2024

Quarter	Tests performed*	Fentanyl positive (all substances)	Take home tests distributed [~]
Jan-Mar 2024	1,367	1,002 (73%)	1,331
Apr-Jun 2024	1,249	901 (72%)	1,043

Data source: Agiloft, BC Centre for Substance Use, Public Health Units, Community and Mental Health Service Providers. Numbers may change with data quality and analysis refinements and are not directly comparable to numbers reported previously.

*A revised data collection instrument was implemented effective March 2021 to improve completeness of reporting.

[~]Data collection began March 2021.

Table 5: Drug checking by substance in Fraser Health, January-March 2024 and April-June 2024

Buy-as	Tests performed		Fentanyl positive		Benzodiazepine positive ⁺	
	Jan-Mar 2024	Apr-Jun 2024	Jan-Mar 2024	Apr-Jun 2024	Jan-Mar 2024	Apr-Jun 2024
Opioid [^]	883	805	864 (98%)	777 (97%)	544 (62%)	364 (45%)
Stimulant	210	203	17 (8%)	13 (6%)	2 (1%)	2 (1%)
Psychedelic	30	20	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Depressant	19	22	4 (21%)	4 (18%)	15 (79%)	15 (68%)
Other ^{**}	99	84	41 (41%)	33 (39%)	26 (26%)	18 (21%)
All substances	1,241	1,134	926 (75%)	827 (73%)	587 (47%)	399 (35%)

Data source: BC Centre for Substance Use. Numbers may change with data quality and analysis refinements and are not directly comparable to numbers reported previously.

One substance may be tested positive for both fentanyl and benzodiazepine.

[^]Opioid includes heroin, fentanyl, and prescription opioids.

^{**}Other includes substances mixtures. For example, fentanyl and methamphetamine, and fentanyl and cocaine.

⁺Due to limitations with Benzodiazepine Test Strips (BTS), BTS are only used in combination with Fournier Transform Infrared (FTIR) spectroscopy at Fraser Health, and are not provided for take home use.

Program Updates

More than 80 drug samples analyzed during two-day drug-checking blitz outside of FVDED in the Park



Harm reduction staff say drug-checking event was a “hugely successful weekend.”

As music filled Holland Park for two days during FVDED in the Park last weekend, staff at Fraser Health’s temporary drug-checking tent just outside the festival were kept busy.

Harm reduction staff checked more than 80 samples between Friday and Saturday, many of the samples came from drugs intended to be used by multiple festival attendees.

Staff used an infrared spectrometer to check samples of drugs, the machine would analyze it and determine which drugs were present within the sample.

Drug Checking Lead Jana Baller says it’s a vital harm reduction tool to help keep people safer during the unregulated toxic drug supply crisis.

“Accessing the unregulated drug market could potentially cause harm to people, because there is no ‘quality control’ so there could be other substances added to your drugs or it could even be something completely different,” she said.

“Drug checking is an evidence-informed way to implement harm reduction by providing information about what is in a substance, allowing people who use drugs to make better-informed decisions and take action to reduce potential harms.”

According to the B.C. Coroners Service, 763 people died of unregulated drug deaths in the first four months of 2024.

In April alone, there were more than 180 suspected unregulated drug deaths across B.C. — about 6.1 deaths per day.

Over the weekend, Fraser Health staff say only four samples came back with results that didn't match the expected drug composition and that fentanyl was not detected in any of the checked samples.

Staff at the tent reported that many of the people who used the service said they had seen it promoted on Fraser Health's Instagram channel highlighting the service.

"We received so much positive feedback from the folks attending the event," said Jennifer Conway-Brown, a harm reduction coordinator at Fraser Health. "Folks were very appreciative and excited this service was available even if they were not using substances."

Staff also handed out other harm reduction items like naloxone kits, safer use supplies, ear plugs, safer sex supplies, water, electrolytes, candy, gum and sunscreen.

Learn more about Fraser Health's drug checking services at fraserhealth.ca/DrugChecking.

Supporting vulnerable clients with psychiatric care in the community



Psychiatrist Dr. Ijaz Hussain is meeting clients where they are at. Sometimes, it's via video call or virtual assessment under a bridge.

When you think of a psychiatrist's office, a mobile van is probably not the first thing that comes to mind. However, that is where Dr. Ijaz Hussain often provides psychiatric assessments virtually to clients of the Integrated Homelessness Action Response Team (IHART.)

The IHART team conducts client intake in advance, gathering the pertinent information a psychiatrist would normally ask during their first visit. With formalities out of the way, the psychiatric assessment occurs in the IHART team's mobile van or wherever the client is comfortable connecting virtually. "IHART does a tremendous job gaining the trust of clients, providing initial care, and connecting them to the services they need," says Dr. Hussain. "This allows me to focus solely on the client and let them tell me their story."

Dr. Hussain recalls the case of a man who had been living under a bridge for five years. He presented to the emergency department on several occasions. His parents also called the police, seeking help for their son. "A nurse flagged that this was a mental health issue," says Dr. Hussain. The Tri Cities/New Westminster IHART team found the man in his encampment under a bridge and arranged for him to meet with Dr. Hussain via telephone. "They held up the iPhone, and we had our psychiatric assessment under the bridge. The client was very sick and agreed to a hospital admission. We then connected him to ongoing care in the community."

On average, the IHART team refers two to five clients per week for psychiatric assessments. After an assessment, clients receive a treatment plan, which may include admission to hospital, medication, and connection to local mental health teams in their community. "We have a great success rate because we advocate for the patients and follow through to ensure they are getting the mental health supports they need," says Dr. Hussain.

Expanding IHART services to include psychiatric care is an example of how we are better meeting client needs through shared services provided by Mental Health and Substance Use and Toxic Drug Response and Priority Population teams.

As for the man who was living under the bridge, "I'm pleased to say that his condition was stabilized and he was reunited with his family," says Dr. Hussain. "He was quite successful before his mental health deteriorated, and I'm hopeful he will be successful in the future as well."

Fraser Health and the City of New Westminster launch new toxic drug response program



In partnership with the City of New Westminster, Fraser Health has launched a new initiative aimed at proactively addressing toxic drug poisonings and reducing the risk of fatalities.

The new Second Responder Program combines the expertise of a New Westminster firefighter with the resources of Fraser Health's Overdose Outreach Team, including social workers, registered nurses and harm reduction workers.

"Forming these care connections with people in the comfort of their community and homes will help improve their access to our vast array of regional and community-based substance use services," says Dr. Victoria Lee, president and CEO, Fraser Health. "This innovative program provides compassionate, personalized support directly to those in need, improving care outcomes and reducing the risk of toxic drug poisoning."

The urgency of this program is underscored by the devastating toll of toxic drug poisonings in British Columbia, with over 2,500 lives lost in 2023 alone. New Westminster Fire and Rescue Services responded to more than 700 toxic drug poisoning calls last year, resulting in 38 fatalities.

Statistics show that the majority of these deaths in the Lower Mainland occur in private residences, often when individuals are using drugs alone. The Second Responder Program aims to pre-emptively intervene in these critical situations, thereby reducing the reliance on emergency first responder services.

Following a toxic drug event, the Second Responder team will reach out for consent to meet with the affected individual. This compassionate approach involves a firefighter and members of the Fraser Health Overdose Outreach Team visiting the individual in their community or home to provide essential support, including education, harm reduction supplies and assistance with accessing the health care system.

Additionally, the program extends its reach to include education, resources and training for the use of naloxone for family members and friends.

This initiative strives to save lives and enhance access to essential services for those affected by toxic drug poisonings. As Fraser Health continues its mission to safeguard the health and well-being of communities, the Second Responder Program stands as a beacon of hope and support for those struggling with substance use challenges.

Learn more about the program in the [news release](#).