

# FRASER HEALTH OVERDOSE RESPONSE PUBLIC REPORT

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**July – December 2022**

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



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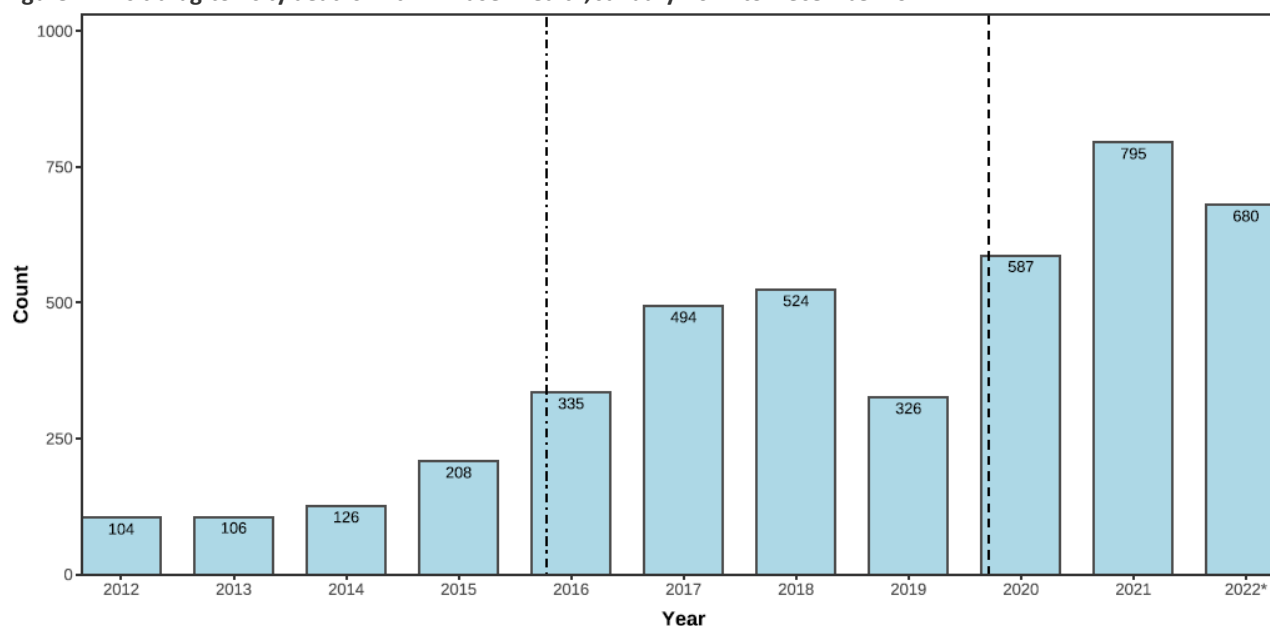
# Surveillance Summary

## December 2022

### ILLICIT DRUG TOXICITY DEATHS

- The highest annual numbers of illicit drug toxicity deaths ever recorded in Fraser Health occurred in 2021, with 795 deaths in total.
- In 2022, there were an average of 57 illicit drug toxicity deaths per month.
- Compared with 2021, the communities with increases in deaths in 2022 were in Mission (+83%) and Coquitlam (+3%).

**Figure 1: Illicit drug toxicity deaths within Fraser Health, January 2012 to December 2022**



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 December 31, 2022.

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 December 2022.

Table 1: Illicit drug toxicity deaths within Fraser Health, January 2021 to December 2022

Community**	2022	2021	% Change 2022 vs. 2021
<b>Fraser East</b>			
Abbotsford	88	87	1
Chilliwack	47	58	-19
Mission	33	18	83
<b>Fraser North</b>			
Burnaby	69	81	-15
Coquitlam	32	31	3
Maple Ridge	36	45	-20
<b>Fraser South</b>			
Langley	41	59	-31
Surrey	232	290	-20
Other Communities	102	126	-19
<b>Fraser Health</b>	<b>680</b>	<b>795</b>	<b>-14</b>
<b>BC</b>	<b>2,272</b>	<b>2,306</b>	<b>-1</b>

Data source: BC Coroners Service to December 31, 2022.

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.

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



**Table 2: Suspected paramedic-attended toxic drug poisoning events within Fraser Health, January 2021 to December 2022**

Community**	2022			2021		Rate change 2022 vs. 2021
	Dec (Avg. past 12 months~)	Jan-Dec	Rate per 100,000 Jan-Dec	Jan-Dec	Rate per 100,000 Jan-Dec	
<b>Fraser East</b>						
Abbotsford	70 (116)	1,317	912	1,226	869	5
Agassiz / Harrison^	<5 (<5)	40	409	79	825	-50
Chilliwack	53 (49.7)	582	628	752	834	-25
Hope^	6 (<5)	44	538	80	995	-46
Mission	41 (31.4)	371	883	312	760	16
<b>Fraser North</b>						
Burnaby	44 (48.9)	567	238	581	249	-4
Coquitlam	22 (32.7)	377	272	473	349	-22
Maple Ridge	23 (45.2)	488	586	683	843	-31
New Westminster	47 (35)	426	558	564	757	-26
Pitt Meadows	5 (<5)	46	257	49	281	-9
Port Coquitlam	9 (11.8)	134	237	270	487	-51
Port Moody / Anmore / Belcarra	<5 (<5)	53	151	49	144	5
<b>Fraser South</b>						
City of Langley	18 (29.2)	326	1,277	341	1,354	-6
Delta	10 (14.3)	161	157	197	195	-20
South Surrey / White Rock	11 (12.2)	145	142	177	183	-22
Surrey	123 (203.3)	2,317	499	3,064	677	-26
Township of Langley	20 (19.6)	235	196	335	286	-32
<b>Fraser Health</b>	<b>507 (664.9)</b>	<b>7,629</b>	<b>434</b>	<b>9,232</b>	<b>539</b>	<b>-19</b>

Data source: Patient Care Record data from BC Emergency Health Services to December 31, 2022. Restricted to those 13 years of age or older.

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.

~Average of past 12 months, including 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, July-September 2022 and October-December 2022**

Site Type	Visits for consumption		Overdoses reversed <sup>^</sup>	
	Jul-Sep 2022	Oct-Dec 2022	Jul-Sep 2022	Oct-Dec 2022
Overdose prevention sites	10,227	11,056	26	28
Supervised consumption sites	4,279	3,636	41	37

<sup>^</sup>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, July-September 2022 and October-December 2022**

Quarter	Tests performed*	Fentanyl positive (all substances)	Take Home tests distributed <sup>~</sup>
Jul-Sep 2022	648	400 (62%)	834
Oct-Dec 2022	781	557 (71%)	574

Data source: Agiloft, BC Centre for Substance Use, Public Health Units, Community and Mental Health Service Providers.

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

<sup>~</sup> Data collection began March 2021.

**Table 5: Drug checking by substance in Fraser Health, July-September 2022 and October-December 2022**

Buy-as	Tests performed		Fentanyl positive		Benzodiazepine positive <sup>+</sup>	
	Jul-Sep 2022	Oct-Dec 2022	Jul-Sep 2022	Oct-Dec 2022	Jul-Sep 2022	Oct-Dec 2022
Opioid <sup>^</sup>	246	353	241 (98%)	332 (94%)	130 (53%)	183 (52%)
Stimulant	96	124	4 (4%)	7 (6%)	1 (1%)	0 (0%)
Psychedelic	47	18	0 (0%)	2 (11%)	1 (2%)	0 (0%)
Depressant	11	6	1 (9%)	0 (0%)	7 (64%)	3 (50%)
Other <sup>**</sup>	75	64	36 (48%)	36 (56%)	8 (11%)	14 (22%)
<b>All substances</b>	<b>475</b>	<b>565</b>	<b>282 (59%)</b>	<b>377 (67%)</b>	<b>147 (31%)</b>	<b>200 (35%)</b>

Data source: BC Centre for Substance Use.

<sup>^</sup>Opioid includes heroin, fentanyl, or 'down'.

<sup>\*\*</sup>Other includes substances mixtures. For example, heroin and methamphetamine, cocaine, and heroin.

<sup>+</sup>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

## **New multilingual videos aim to normalize discussions about harm reduction and substance use in South Asian communities**

By Amren Dhadwar and Kulpreet Singh, Program Coordinators, South Asian Health Institute

Courage conversations about the toxic drug supply can save lives.



The toxic drug crisis is affecting everyone, regardless of their job, education, age, ethnicity and race. The people who are affected and dying from toxic drugs are our families, friends, colleagues and many other people who make up our communities. In 2022, the South Asian Health Institute (SAHI) ran a radio advertising campaign to raise awareness amongst South Asian communities in our region. These were well received. "I heard your radio ad. I was very happy to hear it. This was the first time I heard an ad like this on the radio," said a member of our South Asian community.

SAHI has built on the radio campaign and repurposed the scripts for a series of videos. The videos highlight the power of listening and checking in with loved ones, friends and colleagues who use substances so they can access the help they need without any fear or shame. Click on the links below to view the videos:

- [English](#)
- [Hindi](#)
- [Punjabi](#)
- [Urdu](#)

SAHI also launched a survey recently to learn about the perspectives and experiences of South Asian communities around mental health and substance use. We invite all Fraser Health staff who identify as South Asian and live within our region to complete this survey. It will take approximately 10-20 minutes to complete and is anonymous and confidential.

### **Complete the survey.**

Please share [this link](#) with colleagues who identify as members of our region's South Asian community.

Connect with us if you would like to help promote the survey in your community by emailing [southasianhealth@fraserhealth.ca](mailto:southasianhealth@fraserhealth.ca). The survey is also available in Punjabi, Hindi and Urdu.

To learn more about SAHI and our work, visit [fraserhealth.ca/sahi](https://www.fraserhealth.ca/sahi).

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



## **Smoking substances is as risky as injecting them**

By Carrie Stefanson, Senior Public Affairs Consultant

As the overdose public health emergency continues to claim lives, we're reminding people who use substances that smoking toxic substances carries the same risk of overdose as injecting them.

The unpredictable nature of the highly toxic drug supply means all forms of ingesting substances come with a heightened risk of overdose.

To further spread this important message among people who use substances, we are rolling out a new advertising campaign on social media and in transit locations throughout the region. The goal is to raise awareness and point people to supportive resources, such as how to prevent, recognize and respond to an overdose and how to access drug checking services.

Fraser Health data shows smoking was the mode of consumption for 50 per cent of the 45,968 visits to overdose prevention and consumption sites between January and September 2022 – up from 35 per cent for the same period in 2021.

“We know there is a perception that smoking may be less risky than injecting substances – primarily opioids – but that is not the case,” says Dr. Maulik Baxi, medical health officer. “We’re seeing a trend toward more people smoking rather than injecting substances as the number of overdose deaths tragically continues to rise.”

The trend towards smoking rather than injecting substances is reflected in the [BC Coroners Service Death Review Panel](#) report, which shows that 44 per cent of people who died of a toxic drug poisoning in B.C. in 2021 had smoked substances, compared with 36 per cent in 2017.

“Our government continues to confront this emergency from every angle, making the large, systemic changes necessary to turn the tide on this crisis,” says Sheila Malcolmson, Minister of Mental Health and Addictions. “We have rapidly scaled up the number of overdose prevention services from one site to 42, including 13 sites offering inhalation services. Fraser Health’s information campaign is a critical part of our work to ensure people are aware of the risks associated with substance use, and the measures they can take to protect themselves and others.”

For more information, please visit [fraserhealth.ca/overdose](https://www.fraserhealth.ca/overdose).

For information on the Toxic Drug and Health Alerts service, along with resources, visit [Toward the Heart](#).



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

## **Decriminalization of people who use drugs in B.C.**

Starting January 31 a three-year temporary exemption under the [Controlled Drugs and Substances Act](#) will mean that people who use drugs will not face criminal penalties for possessing small amounts of certain illicit drugs for personal use. Decriminalization is one aspect of a broad response to break down barriers that prevent people from getting support and create new pathways to life-saving services.

This exemption does not mean these drugs are now legal like the recent changes to legalize cannabis. Drug trafficking of illegal substances in any amount will remain illegal.

Under [B.C.'s decriminalization framework](#), this work will be monitored and evaluated including impacts to overall rates of drug use. We know that decriminalizing the use of small amounts of certain drugs has not led to an increase in substance use in other jurisdictions that have taken this step.

More information is available through the [Government of B.C.](#) or by contacting [decrim@fraserhealth.ca](mailto:decrim@fraserhealth.ca).