

# Provincial Overdose Emergency Monthly Situational Report – July 2017

# This report covers the Fraser Health region, with data up to the end of July 31, 2017 unless otherwise noted.

During July 2017, there was a decrease in the number of overdose deaths and the number of overdose events seen in the Fraser Health region.

**Illicit Drug Overdose Deaths**: There were fewer overdose deaths in July (n=31) compared to June (n=36). Overdose deaths from January to July 2017 were 65% and 185% higher, compared to the first seven months of 2016 and 2015, respectively. In the first seven months of 2017, fentanyl was detected in 79% of illicit drug overdose deaths in Fraser Health.

**Suspected Overdose Events**: In July, compared to June, there was a decrease in the number of suspected overdose events seen in Fraser Health Emergency Departments.

**Take Home Naloxone**: 82 new sites have joined since April 2016, bringing the total number of Take Home Naloxone sites in Fraser Health to 103. There were 5,723 kits dispensed from January to June 2017.

*Please visit <u>fraserhealth.ca/overdose</u> to learn more about the Overdose Public Health Emergency and to find out where to obtain naloxone.* 

#### **NEW – Actions in Fraser Health**

Beginning with this report, we include information about actions and initiatives underway in Fraser Health to improve access to safe consumption sites, mental health and substance use treatment, education for health care providers and community stakeholders, and community-specific responses.

### Supervised Consumption Services and Overdose Prevention Sites:

• Two Supervised Consumption Service sites opened in Surrey in June with an on-site visit in July by Judy Darcy, Minister of Mental Health and Addictions.

### Mental Health & Substance Use Services:

- New Opioid Agonist Treatment Clinic, providing first line treatment for opioid addiction and connecting people to other services, opened in Maple Ridge on July 10.
- Intensive Case Management Team implemented in Maple Ridge in May to support people with a severe substance use disorder who face complex challenges related to health, housing, and poverty, and face barriers in accessing existing health or social services.

#### **Education:**

• Staff continued to provide overdose prevention, recognition and response training, and support to various government and non-government service providers such as four construction companies, 60 people at two community events, peers of people who use drugs, and hospital staff.



Opioid Agonist Treatment education video created and posted to <u>FraserHealth.ca</u>.

#### **Community-Based Response and Prevention:**

- Staff worked closely with Police, Fire, Ambulance Services, community agencies, service providers, municipalities, and many others to plan and coordinate overdose services and information at public events, such as developing community-specific overdose information brochures and distributing naloxone kits at outdoor music festivals where overdoses may occur.
- Additional staff provided mobile outreach support to people who use drugs where they are located during periods of increased overdose activity, such as when income assistance cheques are issued; support included distributing Take Home Naloxone kits, intervening in overdoses, assessing and referring people to treatment.
- Follow-up on people living in private residences post discharge from an OD related visit to Surrey Memorial Hospital emergency room began in July. Connections are made within 48 hours post-discharge with connection to MHSU and other services.

### Illicit Drug Overdose Deaths - Fraser Health Region

<u>Data Source</u>: BC Coroner Service (additional details below). Preliminary numbers, subject to change.

Overdose deaths within Fraser Health increased sharply in 2015 (Figure 1) and continue to be higher than historical levels. During July 2017, there were 31 illicit drug overdose deaths in Fraser Health, compared to 36 deaths during June 2017 (Appendix-Figure 2).

- From January to July 2017, the annualized rate, per 100,000, of overdose deaths was lower in Fraser Health (27.7) compared to B.C. (31.3).
- In Fraser Health, overdose deaths during the first seven months of 2017 were 65% and 185% higher, compared to the first seven months of 2016 and 2015, respectively.
- From January to July 2017, the overdose death rate was highest among 30-39 year olds (Appendix-Figure 3).
  From January to July 2017, males accounted for 85% of all overdose deaths.
- In 2017, according to the BC Coroners Service, 87% of overdose deaths in Fraser Health happened inside, with 69% in private residences; 12% occurred outside on sidewalks, streets, vehicles, parks, etc.
- Among illicit drug overdose deaths in Fraser Health during 2016 where the Coroner's investigation is complete, 41% were using substances alone at the time of fatal overdose; 69% of those who died were using drugs in private residences.

• Data up to July 2017 showed that fentanyl was detected in 79% of overdose deaths in the region, compared to 62% during 2016.

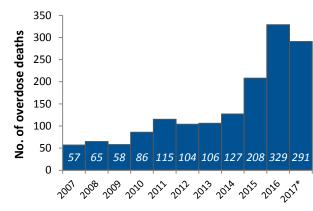


Figure 1. Number of illicit drug overdose deaths within Fraser Health.

Data Source: BC Coroner Service, 2017 data for Jan to Jul.

### **Emergency Department – Suspected Overdose Events**

<u>Data Source</u>: Fraser Health Emergency Departments (Additional details below). Preliminary numbers, subject to change.

During July 2017, there was a decrease in the number of suspected overdose events across Fraser Health Emergency Departments (EDs). During July, 399 suspected overdose events presented to the 12 EDs in the region, compared to 446 events during the preceding month (Appendix-Figure 4).



From January to July 2017:

- There were 3,149 suspected overdose events seen at Fraser Health EDs (Appendix-Table 2).
- The majority of events were among males (70%), and the highest numbers of events were among those 19-29 years old (35%), followed by those 30-39 years old (26%). Males aged 19-39 accounted for 43% of all suspected overdose events.
- Opioids were associated with 74% of the suspected overdose events; this is likely an underestimate due to patients and clinicians being uncertain of the exact composition of the substances consumed.
- 10% of the patients with a suspected overdose were admitted to hospital.

### BC Ambulance – Suspected Overdose Events

<u>Data Source</u>: Patient Care Reports, BC Ambulance, BC Emergency Health Services (Additional details below). Preliminary numbers, subject to change.

Preliminary data on suspected overdose events attended by BC Ambulance up to the end of July 2017.

In July 2017, paramedics attended 505 suspected overdose events within Fraser Health, compared to 586 events during June (Appendix – Figure 5). These numbers will likely increase as additional data are received.

From January to July 2017, paramedics responded to 4,222 suspected overdose events within the Fraser Health region (Appendix – Table 3). The age and sex profile of suspected overdose events were similar to trends seen in Emergency Departments; the majority of the events were among males (70%) and those aged 19-39 years (52%).

From January to July 2017:

• 73% of suspected overdose events resulted in the patient being transported to a hospital.

- Paramedics administered naloxone during 1,198 (28%) events; additional naloxone may have been given by other first responders and by community members before paramedics arrived at the scene.
- Home/residence (39%) and street/highway (33%) were the most common locations where paramedics attended suspected overdose events.

### **Naloxone Distribution**

Data Source: BC Take Home Naloxone Program, BC Centre for Disease Control, data extracted August 31, 2017.

Since the declaration of the overdose emergency in April 2016, Fraser Health has worked hard to expand the number of sites distributing Take Home Naloxone (THN) kits. Between April 2016 and June 2017, 82 new sites were added, bringing the total number of sites to 103. Furthermore, 152 community sites in the region registered to receive naloxone boxes for in-facility overdose response between December 2016 and July 2017.

In the first six months of 2017 there were 5,723 THN kits dispensed in Fraser Health; this was over 350% higher than the same period in 2016. During 2016, 4,659 Take Home Naloxone kits were dispensed within Fraser Health.

A prescription is no longer needed to obtain naloxone and individuals can directly purchase naloxone from pharmacies. Please visit <u>fraserhealth.ca/overdose</u> to learn more about where kits may be obtained.

### **Additional Information**

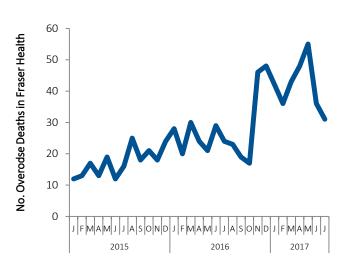
For more information on the Overdose Public Health Emergency, what you can do and Fraser Health's response, go to <u>http://www.fraserhealth.ca/overdose</u>



### **Appendix: Data**

### **Overdose Deaths**

Figure 2. Monthly illicit drug overdose deaths within Fraser Health.



Data Source: BC Coroner Service. Preliminary data, numbers subject to change.

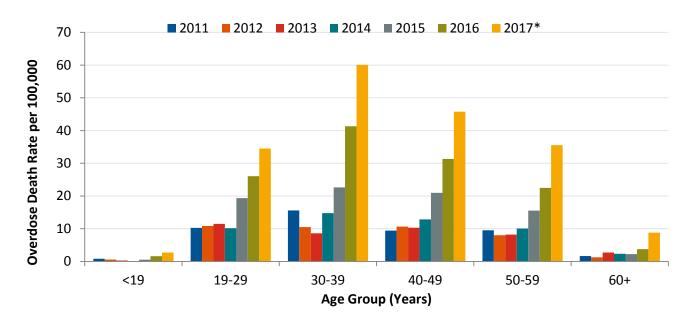
Table 1: Illicit drug overdose deaths within Fraser Health.

	No. Deaths Jan-Jul 2017	Projected* No. Deaths 2017	No. deaths 2016	% Increase (2017* vs. 2016)
BC	876	1,502	978	54
Fraser Health <sup>^</sup>	291	499	329	52
Surrey	101	173	119	45
Maple Ridge	22	38	27	40
Abbotsford	33	57	39	45
Langley (City+ Township)	20	34	30	14
Burnaby	30	51	39	32
Chilliwack	16	27	12	129
Coquitlam	16	27	13	111
New Westminster	12	21	10	106
Other communities	41	70	32	76

^ BC Coroner assigns location based on location of injury (i.e. overdose) and if that is missing, location of death.

Data source: BC Coroner Service. Preliminary data, numbers subject to change. \* Projected based on available months in 2017

#### Figure 3. Illicit drug overdose death rate per 100,000 people, by age group, within Fraser Health (2011-2017\*).

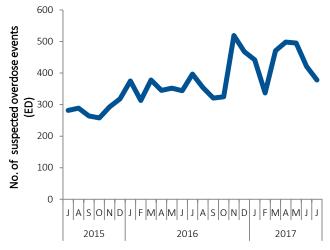


Data source: BC Coroner Service. Preliminary data, numbers subject to change. \* Annualized rate based on available months in 2017



#### **Suspected Overdose Visits to Emergency Department**

Figure 4. No. of suspected overdose events seen at Fraser Health Emergency Departments.



Data Source: Fraser Health Emergency Departments

Community <sup>^</sup> of	No. events Jul	No. events 2017	No. events 2016
residence	2017 (Avg. past 12 months~)	Jan-Jul (Rate per 100,000) *	(Rate per 100,000)
Abbotsford	28 (46.0)	304 (453)	472 (410)
Agassiz-			
Harrison	<5 (<5)	16 (345)	30 (377)
Burnaby	30 (25.9)	180 (153)	302 (149)
Chilliwack	32 (33.5)	261 (604)	276 (373)
City of Langley	18 (15.1)	119 (941)	139 (641)
Coquitlam	14 (13.9)	108 (170)	145 (133)
Delta	11 (10.6)	73 (143)	110 (125)
Норе	<5 (<5)	15 (385)	24 (359)
Maple Ridge	16 (26.6)	197 (523)	332 (515)
Mission	7 (12.6)	96 (475)	117 (337)
New			
Westminster	8 (14.9)	98 (280)	182 (303)
Pitt Meadows	5 (<5)	32 (367)	51 (341)
Port Coquitlam	14 (11.8)	77 (274)	126 (261)
Port Moody	<5 (7.1)	49 (303)	70 (252)
Surrey	142 (149.0)	1,094 (443)	1,643 (388)
Township of			
Langley	18 (12.8)	92 (179)	181 (206)
White Rock	5 (<5)	32 (307)	43 (241)
Non-Fraser			
residents	42 (40.6)	306 (n/a)	390 (n/a)
Fraser Health	399 (433.7)	3,149 (386)	4,633 (331)

^ Community based on reported residential address. Homeless people assigned to the community where Emergency Department was located ~ based on average of past 12 months, including the most recent month

\* Rate annualized based on available months for 2017

-- counts under 5 not reported as they are potentially identifiable

Restricted to those 13 years of age or older

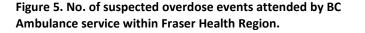
**Health Emergency Departments.** 

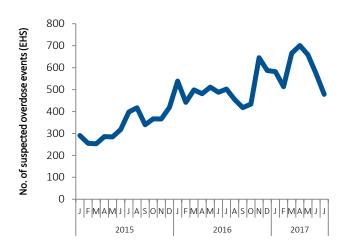
Table 2. Suspected overdose events presenting at Fraser



### Suspected Overdose Events attended by BC Ambulance

Data on suspected overdose events attended by BC Ambulance are current to the end of July 2017.





Data Source: Patient Care Records data from BC Emergency Service. Preliminary data, numbers subject to change. Table 3: Suspected overdose events attended by BCAmbulance service within Fraser Health Region.

Community of event <sup>^</sup>	No. events Jul 2017 (Avg. past 12 months~)	No. events 2017 Jan-Jul (Rate per 100,000) *	No. events 2016 (Rate per 100,000)
Abbotsford	37 (55.2)	384 (572)	574 (499)
Agassiz-Harrison	5 (<5)	19 (410)	36 (453)
Burnaby	35 (42.9)	315 (267)	495 (245)
Chilliwack	32 (39.8)	289 (669)	378 (510)
City of Langley	26 (25.3)	198 (1,566)	256 (1,181)
Coquitlam	21 (27.7)	214 (336)	282 (258)
Delta	18 (14.5)	112 (219)	154 (176)
Норе	<5 (<5)	28 (719)	30 (449)
Maple Ridge	18 (34.0)	251 (667)	434 (673)
Mission	12 (14.4)	122 (603)	124 (358)
New Westminster	19 (25.5)	181 (517)	272 (453)
Pitt Meadows	<5 (<5)	36 (413)	51 (341)
Port Coquitlam	15 (15.6)	105 (373)	157 (325)
Port Moody	<5 (<5)	22 (136)	38 (137)
Surrey	175 (224.9)	1,703 (689)	2,450 (579)
Township of Langley	21 (19.8)	145 (283)	229 (260)
White Rock	<5 (<5)	18 (173)	40 ( 224)
Fraser Health	444 ( 556.7)	4,142 ( 508)	6,000 ( 429)

Please note: Numbers for the most recent month are likely an underestimate and will increase as entry of BC Ambulance Patient Care Forms is completed.

^ Community based on location where the paramedics attended to the suspected overdose event

~ based on average of past 12 months, including the most recent month

\* Rate annualized based on available months for 2017

-- counts under 5 not reported as they are potentially identifiable

Restricted to those 13 years of age or older



### **Notes on Data Sources**

Please note that numbers in this report are likely an underestimate. This is because first responders (fire, police or paramedics) are not called to all overdose events, not all events are seen at emergency departments and the algorithms used to detected events do not capture all the overdoses.

#### **BC Coroner Service**

Coroner numbers are preliminary and subject to change as investigations are finalized. Coroner assigns location to events based on location of overdose and location of death. The Coroner's fentanyl overdose report is one month behind overdose deaths reports due to additional time needed for fentanyl testing. Currently, the BC Coroner service combines numbers for City of Langley and Township of Langley.

The coroner illicit drug category includes street drugs (heroin, cocaine, MDMA, methamphetamine, etc.), medications that may not have been prescribed to the deceased, combinations of the above with prescribed medications, and origin of drug not known. Additional information can be found in BC Coroner reports <a href="http://www2.gov.bc.ca/gov/content/safety/public-safety/death-investigation/statistical-reports">http://www2.gov.bc.ca/gov/content/safety/public-safety/death-investigation/statistical-reports</a> .

#### Fraser Health Emergency Department Data

Fraser Health Overdose Surveillance system is a dynamic syndromic surveillance system which captures suspected overdose events among those 13 years of age or older. These are suspected events and not confirmed cases. These numbers may change as data entry is finalized. The suspected overdose events include those associated with opioids, stimulants, hallucinogens, and unspecified substances. Events were identified based on physician's discharge diagnosis, patient's stated complaint, chief complaint code assigned at triage, and nursing notes associated with the chief complaint. Locations are assigned based on reported residential postal code.

#### **BC** Ambulance

Fraser Health receives weekly data from BC Ambulance, BC Emergency Health Services (EHS) via the BC Centre for Disease Control. Data are based on Patient Care Forms completed by paramedics for each event they attend. The data on the most recent cases is delayed by a few weeks due to time needed for collection, transmission, and entry of the information. Patient Care Forms are completed for more than 90% of the events attended by paramedics. These are suspected overdose events and not confirmed cases. These numbers many change as data entry is finalized.

Suspected overdose events are identified based on naloxone administration, provisional impression of 911 dispatch, and provisional impression of the paramedics. We remove events suspected of not being overdose events and those associated primarily with alcohol. Locations are assigned based on latitude and longitude of the location where ambulance was dispatched. In addition to ambulance, other services (police, fire, community organizations, etc.) may also be present during an overdose response in the community.