

FRASER HEALTH OVERDOSE RESPONSE PUBLIC REPORT

July – December 2021

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



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Surveillance Summary

December 2021

ILLICIT DRUG TOXICITY DEATHS

- The highest numbers of illicit drug toxicity deaths ever recorded in Fraser Health occurred in November to December 2021, with 76 to 83 deaths per month respectively (reported by BC Coroners Service).
- In 2021, there was an average of 64 illicit drug toxicity deaths per month.
- Compared with 2020, deaths have increased by the largest margin in Chilliwack, Langley City & Township and Burnaby (Table 1).

Table 1: Illicit drug toxicity deaths within Fraser Health, January 2020 to December 2021

Community [^]	Jan-Dec 2021	2020	% Change (2021 vs. 2020)
Fraser East			
Chilliwack	55	37	49
Abbotsford	86	66	30
Fraser North			
Burnaby	78	57	37
Maple Ridge	45	39	15
New Westminster	42	37	14
Fraser South			
Langley (City & Township)	56	38	47
Surrey	281	222	27
Other Communities	122	90	36
Fraser Health	765	586	31
BC	2,224	1,676	26

Data source: BC Coroners Service to December 31, 2021.

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.

PARAMEDIC-ATTENDED TOXIC DRUG POISONING EVENTS

- In December 2021, there were 863 toxic drug poisoning events responded to by paramedics in Fraser Health, compared to 554 in December 2020.
- The rate of toxic drug poisoning events have increased by 42% compared to 2020, and have increased across almost all communities (see Table 2).

Table 2: Suspected paramedic-attended toxic drug poisoning events within Fraser Health, January 2020 to December 2021

Community [^]	2021*			2020		
	Dec (Avg. past 12 months [~])	Jan-Dec	Rate per 100,000 Jan-Dec	Jan-Dec	Rate per 100,000 Jan-Dec	Rate change 2021* vs. 2020
Fraser East						
Abbotsford	145 (95.6)	1,227	883	868	631	40
Agassiz / Harrison [^]	10 (6.1)	80	836	37	390	114
Chilliwack	69 (60.8)	755	830	486	543	53
Hope [^]	5 (6.5)	80	1,007	37	466	116
Mission	48 (23.7)	309	754	216	533	42
Fraser North						
Burnaby	67 (48.5)	587	255	534	234	9
Coquitlam	37 (37.8)	475	351	329	247	42
Maple Ridge	77 (52.9)	684	872	376	483	81
New Westminster	41 (45.6)	562	751	376	510	47
Pitt Meadows	<5 (<5)	50	290	20	117	147
Port Coquitlam	16 (22.5)	271	491	180	328	50
Port Moody / Anmore / Belcarra	5 (<5)	50	151	40	122	24
Fraser South						
City of Langley	42 (26.3)	341	1,387	216	889	56
Delta	21 (16.0)	199	198	167	169	17
South Surrey / White Rock	12 (14.8)	177	184	137	145	27
Surrey	246 (251.1)	3,071	686	2,148	489	40
Township of Langley	20 (29.0)	337	290	275	241	20
Fraser Health	863 (745.5)	9,255	545	6,442	385	42

Data source: Patient Care Record data from BC Emergency Health Services to December 31, 2021. 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.

*Rate annualized based on available months for 2021.

[~]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 2021 and October-December 2021

	Visits for consumption		Overdoses reversed [^]	
	Jul-Sep 2021	Oct-Dec 2021	Jul-Sep 2021	Oct-Dec 2021
Overdose prevention sites	6,421	7,048	35	95
Supervised consumption sites	5,705	5,550	195	255

[^]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 2021 and October-December 2021

Quarter	Tests performed on site			Take Home tests distributed [~]
	Tests performed*	Fentanyl positive (all substances)	Fentanyl positive in substances not expected to contain fentanyl	
Jul-Sep 2021	147	108 (74%)	42 (29%)	628
Oct-Dec 2021	92	63 (69%)	32 (35%)	756

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.

[~] Data collection began March 2021.

Table 5: Drug checking by substance in Fraser Health, July-September 2021 and October-December 2021

Buy-as	Tests performed		Fentanyl positive		Benzodiazepine positive ⁺	
	Jul-Sep 2021	Oct-Dec 2021	Jul-Sep 2021	Oct-Dec 2021	Jul-Sep 2021	Oct-Dec 2021
Opioid [^]	34	25	33 (97%)	24 (96%)	19 (56%)	14 (56%)
Stimulant	3	12	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Psychedelic	0	1	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Depressant	0	0	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Other**	4	3	3 (75%)	3 (100%)	4 (100%)	2 (67%)
All substances	41	41	36 (88%)	27 (66%)	23 (56%)	16 (39%)

Data source: BC Centre for Substance Use.

[^]Opioid includes heroin, fentanyl, or 'down'.

**Other includes substances mixtures. For example, heroin and methamphetamine, cocaine, and heroin.

⁺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.

ROLE OF BENZODIAZEPINE IN THE TOXIC DRUG SUPPLY

Benzodiazepines are a class of drugs that, when prescribed and taken as per treating physician, can help treat anxiety and help with sleep. However, when the drug supply is contaminated with benzodiazepine, it can significantly enhance the effect of opioids and affect drug toxicity in a number of ways¹.

For patients, benzodiazepines, or ‘benzo’ can:

- Cause dependency with repeated use. It can cause tolerance levels to increase with regular use, which means people will need to use it in increasing quantities and often more frequently.
- Cause withdrawal symptoms, which often presents as severe anxiety.
- Cause complicated overdoses, which include symptoms of memory loss or lack of orientation upon recovering from an overdose.
- Increase the risk of falls and injuries.
- Cause seizures due to withdrawal. Repeated seizures can be progressively worse and this can be a life threatening condition in some people.
- Significantly increase the risk of overdose deaths through the use of using multiple drugs together (such as an opioid, benzo, and alcohol).

Important information for providers:

- Traditional Opioid Agonist Therapy (OAT) does not help with benzo dependence or withdrawal. The differences between opioid dependence and benzo dependence make treating both dependencies challenging. Patients with a benzo dependency will have difficulty sustaining treatment on OAT.
- Several different types, potency, and doses of benzo can be found in the drug supply. Treating benzodiazepine dependence requires additional skill and experience.

For health care systems:

- The increase of benzo in the circulating drug supply can increase the number of complicated overdoses and overdose deaths.

¹ Reference: [Clinical Bulletin: Benzodiazepines and Opioids. June 8, 2021. BCCSU.](#)

Program Updates

Meet Fraser Health's new drug checking coordinator

By Nick Eagland, Consultant, Communications & Public Affairs

As the illicit drug supply becomes increasingly toxic, Fraser Health is supporting people who use drugs to make safer, informed decisions with the expansion of drug-checking services and its first-ever drug checking coordinator.



Jana Baller, drug checking coordinator for Overdose Response and Vulnerable Populations, says testing people's drugs adds a layer of protection against the dangers of the toxic illicit drug supply. Many people have been poisoned by drugs they were unaware were contaminated by the addition of substances such as carfentanil and benzodiazepines.

"It empowers people to make a more informed decision about their usage," says Baller, who joined Fraser Health in January 2022.

"If people get something that they don't want, they can make a decision to not take it and maybe even bring it back to their supplier and say, 'Hey, you sold me stuff that I don't want.' When you know what you've got, you can make decisions about your use."

In the Fraser Health region, point-of-care drug checking using a Fourier-Transform Infrared Spectrometer (FTIR) machine is offered at Starship Health Contact Centre Purpose Society in New Westminster and at the SafePoint Supervised Consumption Site in Surrey.

As a coordinator, Baller develops and provides training, with the guidance of the British Columbia Centre on Substance Use, to Fraser Health's Drug checking technicians and harm reduction service providers on the FTIR machine and its software.

Baller uses her specialized knowledge and skillset to help the technicians interpret results, and follows protocols for drug sample analysis and data recording. She works with the Harm Reduction team and Medical Health Officers to send out public health alerts when needed.

And she is working on Fraser Health's plan to expand the use of additional FTIR machines to existing harm reduction sites in Fraser South and in Fraser East in the coming months.

"I love this work," Baller says. "Seeing people start to trust you and warm up to you, and really appreciate your work – and it's important work that that we do in harm reduction and drug checking – it's really rewarding as well."

Learn more about how people can stay safer while using substances at [fraserhealth.ca/overdose](https://www.fraserhealth.ca/overdose).

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

Collaborating for Compassionate Communities: Community Action Tables

By Claire Egan, Jackie Ainsworth, & Ariella Zbar (PPH)



Communities throughout Fraser Health have come together to address the root causes of overdose in their communities. The overdose public health emergency is complex and has no single one-size-fits-all solution. Addressing the overdose emergency requires intervention at many levels - from treatment, to harm reduction, to health promotion. Community Action Tables (CATs) were formed as a way to mobilize communities to target local resources where they are most needed. They are multi-sector partnerships that include people with lived and living experience and a broad range of community stakeholders.

There are social, political and economic factors that can contribute to negative outcomes for people who use substances as well as the wider community. Social exclusion (prejudice, stigma, racism) is one of the root causes of despair and isolation and a contributing factor to why people use substances. The devastating impacts of stigma create profound barriers for people who use substances as well as reinforce belief structures that get in the way of community action.

A resilient community is one that thrives despite experiences of adversity and day-to-day realities of poverty, racism, and discrimination. Creating opportunities for people to talk about and understand substance use in new and thoughtful ways is critical. Here are some examples of how our communities are making a difference:

White Rock/South Surrey CAT hosted a community dialogue (virtual and in-person) where a panel of people with living and lived experience of drug use and their family members shared their experiences. It was an evening of support, connection, and shared wisdom.

New Westminster CAT produced two powerful [Anti-Stigma videos](#) that challenge common beliefs about people who use drugs. The videos invite the viewer to reframe their thoughts and use compassion and humanity when thinking about the issue.

Delta - the City of Delta has partnered with Tsawwassen First Nation, Delta Police Department, Delta School District, Fraser Health Authority, Delta Fire Department as well as Delta CAT members to develop a campaign that focusses on removing the stigma surrounding substance use and overdose. The campaign includes social media, videos, and an opportunity to share personal stories at [End the Stigma | Let's Talk Delta](#). A Community Forum is planned in April 2022 to take an honest look at how to best support people who use drugs and their loved ones.

Building safe and inclusive communities necessitates finding common ground and increasing our compassion for one another. When communities come together, they can innovate solutions to their own shared challenges.

Hope in a Helicopter

Submitted by the Overdose Response & Vulnerable Populations Harm Reduction Team

When the floods of November 2021 cut the City of Hope off from the rest of BC, the Fraser Valley came together to offer shelter and provide for both residents and stranded visitors alike.

As the community went into action to bring food, water, and other services to the nearly inaccessible city, the highly dedicated members of the Overdose Response Harm Reduction team knew they had to do the same with their harm reduction services and supplies.

It was that very dedication (and a love for travelling anywhere, anytime) that had Sherri Hedberg, Overdose Outreach Team (OOT) Nurse, climbing into a helicopter at 6:00am one November morning shortly after the state of emergency had been declared. With ten boxes of harm reduction supplies, one tiny overnight bag, and not even knowing where she would be sleeping that night, Sherri was determined to get harm reduction supplies to where people needed them.

“We had been able to fly out a few boxes of Take Home Naloxone kits for people to hand out,” Sherri explained, “but we really felt like we needed some boots on the ground to see what was going on and where we could help out.”

Over the next four days, driving around Hope in the borrowed cars of Fraser Canyon Hospital executives and physicians, Sherri delivered harm reduction supplies to people in the community and to facilities such as the House of Hope Shelter, Hope Medical Clinic, and Fraser Canyon Clinic. Sherri also set up virtual health appointments, saw first time clients in need of assessment, medication, and support, and even convinced a pharmacist to start having harm reduction supplies available in their pharmacy!



Ten boxes of Harm Reduction supplies, one teeny tiny overnight bag...



**THANK YOU
SHERRI!**