



September 2017 Report: Rhode Island Multidisciplinary Review of Drug Overdose Death Evaluation (MODE) Team

Quarterly Trends: October 1, 2016 - March 31, 2017

- Combined data from quarter 4 of 2016 and quarter 1 of 2017 revealed that there were 171 unintentional drug overdose deaths in Rhode Island, compared with 155 deaths during the same time period one year earlier (+10%).
- Fentanyl is the causal agent in the majority of unintentional drug overdose deaths. During quarter 4 of 2016 and quarter 1 of 2017, 67.3% of unintentional drug overdoses were attributed to fentanyl (115 of 171).
 - Fentanyl is a chemical analog of fentanyl. It is 5 times less potent than fentanyl. Fentanyl was causal in two (2) unintentional drug overdose deaths in all of 2016 and in eight (8) unintentional drug overdose deaths in quarter 1 of 2017. In Rhode Island, fentanyl was detected in powder-form and also as pressed counterfeit pills. The counterfeit pills were prepared as oxycodone single entity immediate release tablets, often referred to as “Perc 30s” or Percocet®.
 - Currently none of the publicly available state or national databases track the prevalence of counterfeit medications in the community. There are no validated methods for identifying, documenting, or cataloging counterfeit medication involvement in fatal or nonfatal overdoses.
- While the majority (72.9%) of unintentional drug overdose decedents in 2016 were male, in quarter 1 of 2017, 47% (39 out of 88) of unintentional drug overdose decedents were female.
- In 2016, the highest number of fatal unintentional drug overdoses in Rhode Island were among adults aged 25-34 (n = 96) and 45-54 years (n = 97), respectively. The proportion of the unintentional drug overdose deaths in Rhode Island among adults 25-34 years rose from 15.9% in 2009 to 28.6% in 2016.
- In the first quarter of 2017, there were 333 opioid overdoses reported to the Rhode Island Department of Health (RIDOH) by emergency departments in the state; 319 opioid overdoses were reported as nonfatal. Similar to overdose deaths, the largest proportion of nonfatal overdoses was among individuals aged 25-34 years (37%).
- Combined data from quarter 4 of 2016 and quarter 1 of 2017 revealed that 88.9% of unintentional drug overdose decedents were white, 9.3% were black, and the remainder were Asian, or of unknown race.

Emergent Themes

- In Quarter 1 of 2017, there was an increase in the number of overdose deaths associated with fentanyl, compared with all of 2016.
- Fentanyl has been detected in powder-form and as counterfeit prescriptions presented as oxycodone tablets.
- Females made up a greater proportion of fatal unintentional drug overdose deaths in Quarter 1 of 2017, compared to unintentional drug overdose death data from prior quarters.

Sources:

Rhode Island Department of Health. <http://www.health.ri.gov/data/drugoverdoses/>. Accessed on 08/03/2017

Rhode Island Office of the State Medical Examiner file. Prepared by Traci Green

Rhode Island Opioid Overdose Reporting System, RI Department of Health

Team Recommendations for Structural or Community Prevention

Structural Recommendations

- Develop a method for tracking counterfeit prescription medications and a mechanism for estimating the prevalence of counterfeit medications involved in unintentional drug overdose deaths.
- Design population-based alerts intended for substance use disorder treatment providers and providers of emergency department care. Alerts should be prepared and transmitted as increases in unintentional drug overdoses are identified.
- Design population-based alerts intended for people who use illicit drugs with information on counterfeit drugs identified as contributing to overdose deaths in Rhode Island.
- Develop fact sheets about counterfeit drugs circulating in Rhode Island for communication to people who use drugs and people who provide care and services to people who use drugs. Fact sheets will include myths and facts about these counterfeit drugs, as well as harm reduction methods for individuals using illicit drugs. Circulate to the Rhode Island Department of Corrections, Aids Care Ocean State, Project Weber, Day 1, and other organizations/agencies servicing populations at risk for overdose.
- Notify healthcare providers of a patient's unintentional drug overdose death. Notifications may include information about controlled substance prescriptions written for the patient within the last year.
- Support efforts to improve on-site access to addiction treatment services for individuals residing at homeless shelters who have undertreated or untreated opioid use disorder. Such efforts may include co-location of a medical home and/or an opioid treatment program.

Structural and Community Rapid Response Recommendations

- Prepare and disseminate counterfeit drugs fact sheets (see Structural Recommendations) to people who use illicit drugs and to people who provide care/services to those who use illicit drugs.
- Prepare and disseminate a culturally appropriate Spanish translation of the fact sheet (see Structural Recommendations) to Spanish-speaking communities, including people who use illicit drugs and people who provide care/services to those who use illicit drugs.
- Support policies, programming, and training to improve prescriber utilization of the Prescription Drug Monitoring Program (PDMP); focus these efforts on the risks associated with co-prescribing benzodiazepines and opioids.
- Support policies, programming, and training to improve patient education about the risks of using illicit opioids and/or misusing opioid prescription pain medications with benzodiazepines.
- Support training to improve prescriber counseling of patients on overdose risks when combining opioids with alcohol and/or benzodiazepines.
- Encourage healthcare providers to prescribe naloxone to patients who are being co-prescribed an opioid and a benzodiazepine, and to patients with alcohol use disorder who are being prescribed an opioid.
- Enhance overdose prevention education and naloxone distribution efforts among Rhode Island organizations that focus on women's health issues, including organizations that provide intimate partner violence prevention/intervention, sexual violence and domestic violence prevention/treatment services, and organizations providing services to sex workers.

Summary: Rhode Island continues to see high counts of fatal unintentional opioid overdoses. One-hundred fifteen (115) of the 171 deaths in Quarter 4 of 2016 and Quarter 1 of 2017 were associated with fentanyl. In Quarter 1 of 2017, there was an increase in the number of overdose deaths that were associated with furanyl fentanyl, an analog of fentanyl. This analog has been detected in powder-form as well as in counterfeit pills presented as oxycodone. Opportunities to address this crisis using rapid response recommendations are indicated.

Sources:

Rhode Island Department of Health. <http://www.health.ri.gov/data/drugoverdoses/>. Accessed on 08/03/2017

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