WELCOME & ANNOUNCEMENTS
Data Trend Update: Accidental Overdose Deaths in Rhode Island

Governor Gina M. Raimondo’s Overdose Prevention and Intervention Task Force
October 9, 2019
Presentation Overview

• How Rhode Island Department of Health (RIDOH) Reports on Fatal Overdoses

• Key Terms and Concepts

• Historical and Current Trends in Fatal Overdoses

• Trends in Substances Contributing to Cause of Death

• Brainstorming Next Steps
How Does RIDOH Report on Fatal Drug Overdoses?

- The Office of State Medical Examiners (OSME) determines cause and manner of death based on clinical judgment, experience, and consideration of the following:
  - Autopsy results
  - Toxicology testing
  - Scene investigation
  - Medical history

- RIDOH reports on drug overdose deaths where the manner of death is “Accident,” and does not include other manners such as suicides, homicides, or undetermined deaths.
Key Terms and Concepts

**All-Drug Overdose Deaths**: Any drug contributed to the death.

**Cocaine-involved**: Cocaine contributed to the death (other substances also may have contributed).
  - Cocaine increases heart rate and blood pressure, which may result in heart failure and/or fatal seizures.

**Opioid-involved**: Any opioid, including fentanyl, contributed to the death (other substances also may have contributed).
  - Opioids suppress respiration, and result in hypoxia.
Historical Trends in Fatal Overdoses in Rhode Island

From 2016 to 2018, there was a 6.5% decrease in all-drug overdose deaths (from 336 to 314) and a 5.9% decrease in opioid-involved overdose deaths (from 288 to 271).

Sources: Office of the State Medical Examiners (OSME), Rhode Island Department of Health (RIDOH)
Note: Percent decrease in all drug overdose was 3.6% between 2016 and 2017 and 3.1% between 2017 and 2018. Data reflect accidental drug overdose deaths and do not include suicides, homicides, or undetermined deaths.
Current Trends in Fatal Overdoses in Rhode Island

Between January - June 2018 and January - June 2019:
- **All-drug** overdose deaths **remained stable**
- **Opioid-involved** overdose deaths **decreased**

<table>
<thead>
<tr>
<th>Month</th>
<th>All-Drug</th>
<th></th>
<th>Opioid-Involved</th>
<th></th>
</tr>
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<tbody>
<tr>
<td></td>
<td>2018</td>
<td>2019</td>
<td>YTD Change</td>
<td>2018</td>
</tr>
<tr>
<td>January</td>
<td>17</td>
<td>27</td>
<td>58.8%</td>
<td>15</td>
</tr>
<tr>
<td>February</td>
<td>22</td>
<td>22</td>
<td>25.6%</td>
<td>18</td>
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<tr>
<td>March</td>
<td>27</td>
<td>28</td>
<td>16.7%</td>
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<td>May</td>
<td>32</td>
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<td>June</td>
<td>31</td>
<td>22</td>
<td>0.0%</td>
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<tr>
<td>Jan to Jun TOTAL</td>
<td>156</td>
<td>156</td>
<td>0.0%</td>
<td>135</td>
</tr>
</tbody>
</table>

Sources: OSME, RIDOH
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Data updated as of 9/25/2019.
Why is there a difference seen in all-drug versus opioid-involved trends?
Select Substances Contributing to Cause of Death

Percent of Accidental Drug Overdose Deaths in Rhode Island from All Drugs by Select Substances Contributing to Cause of Death, 2017 – 2019*

Sources: OSME, RIDOH

* January to June 2019

Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
A Closer Look at Cocaine Trends

The proportion of overdose deaths with cocaine as a contributing cause of death increased from 1 in 4 (26%) in 2009 to approximately 1 in 2 in 2018 (46%). This trend has continued in 2019 (49% from January - June 2019).

Percent of Accidental Drug Overdose Deaths in Rhode Island from All Drugs by Select Substances Contributing to Cause of Death, 2017 – 2019*

Sources: OSME, RIDOH

* January to June 2019

Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
Of these cocaine-involved overdose deaths:

95.5% involved cocaine AND at least one other substance

- Fentanyl 71%
- Alcohol 27%
- Benzodiazepines 7%

46% of overdose deaths in 2018 involved cocaine (143 of 314)

Sources: OSME, RIDOH
Note: Does not indicate substances were mixed or used at the same time. Substance categories are not mutually exclusive or exhaustive. Drug category percentages are out of all cocaine-involved overdose deaths. Data reflect January to December 2018. Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths.
Where do opioids fit into these trends?
The majority of drug overdose deaths involve opioids (81% from January 2009 to June 2019).

Sources: OSME, RIDOH
* January to June 2019
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
The majority of drug overdose deaths involve opioids (81% from January 2009 to June 2019).

Sources: OSME, RIDOH
* January to June 2019
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
Among opioid-involved deaths, we have seen an increase in deaths that also involve cocaine.

*January to June 2019*
Opioid and Non-Opioid Involved Fatal Overdoses

The majority of drug overdose deaths involve opioids (81% from January 2009 to June 2019).

Sources: OSME, RIDOH
* January to June 2019
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
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Sources: OSME, RIDOH
* January to June 2019
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
Among deaths that did not involve opioids, we have seen an even greater increase in cocaine involvement.

Percent of Accidental Drug Overdose Deaths in Rhode Island that Have Cocaine as a Contributing Cause of Death, Among Opioid and Non-Opioid Deaths, by Year of Death

Sources: OSME, RIDOH
* January to June 2019
Note: Data reflect accidental drug overdose deaths occurring in Rhode Island and do not include suicides, homicides, or undetermined deaths. Rhode Island residents who are pronounced outside of Rhode Island are not included. Drug Categories not mutually exclusive.
Between January-June 2018 and January-June 2019:

- **All-drug** overdose deaths remained stable.
- **Opioid-involved** overdose deaths decreased.

- The proportion of **cocaine-involved** deaths increased from 1 in 4 in 2009 (26%) to nearly 1 in 2 in 2018 (46%). This trend has continued January–June 2019 (49%).

- In 2018, 46% of fatal overdoses involved **cocaine**.
  - The majority (95.5%) involved cocaine **and at least one other substance**.

- The increasing trend in **cocaine-involved** fatal overdoses is seen in both **opioid-involved and non-opioid involved deaths**.
Brainstorming Next Steps

Gather more information:

• Host focus groups and interviews with people who use drugs to understand drug use patterns.
• Share data to better understand the “who” (treatment history, incarceration history, child welfare involvement).
• Partner with community organizations to understand what is happening at the local level (Prevention Coalitions, Health Equity Zones).
Brainstorming Next Steps

• Develop strategies for reaching people who use cocaine:
  o Communication strategies
  o Rescue strategies
  o Treatment strategies

• Leverage Task Force workgroups to continue data collection and determine interventions.

• Identify unspent grant dollars to implement identified interventions.

• Increase focus on polysubstance use, cocaine use, and other drug use patterns as a part of the Strategic Plan Update.
How can we best respond to this increasing trend in cocaine-involved overdoses?
RHODE ISLAND OVERDOSE RESPONSE STRATEGY

OVERVIEW OF SEIZED DRUGS

New England High Intensity Drug Trafficking Area (HIDTA) Program
October 9, 2019

Data Provided by RIDOH Forensic Drug Chemistry Laboratory 2018
Background Information

• Seized drugs in Rhode Island are submitted for testing to the RIDOH State Health Laboratories, Drug Chemistry Laboratory.

• Submitted evidence (multiple items “exhibits” in a case) is tested using Gas chromatography–mass spectrometry (GC-MS) to identify the drugs.

• GC-MS is capable of separating and identifying multiple chemicals/drugs.

• Seized drug identifications are compiled weekly in the Seized Drug Surveillance report.
Three aspects reviewed:

- We reviewed all cases involving cocaine, fentanyl, heroin, or any of these combinations.

- We took a deeper look at the case reports, which show the drug relationships.

- We reviewed the GC-MS test results.
Case number FC 15-4258 has Cocaine, Fentanyl, and Heroin identifications.

Case number FC 15-4398 has Cocaine and Fentanyl Identifications.

There are 31 Identifications but only 23 cases.
• Only 19% of all cases involved polydrug identifications.

• Polydrug identifications do not indicate mixed drugs were seized.
## Finding The Drug Relationships

**Data Provided by RIDOH Forensic Drug Chemistry Laboratory 2018**

### Exhibit-level findings are found in the case report.

<table>
<thead>
<tr>
<th>Laboratory Case:</th>
<th>Report Dat.</th>
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<tbody>
<tr>
<td>Department:</td>
<td></td>
</tr>
<tr>
<td>Case Number:</td>
<td></td>
</tr>
<tr>
<td>Case Officer:</td>
<td></td>
</tr>
</tbody>
</table>

### Suspect(s):

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<tr>
<th>DOB.</th>
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### Submitted

| ITEM #01
The following evidence was submitted: Evidence for Analysis

**Exhibit 1** Two (2) plastic bags containing material. Material from one (1) plastic bag analyzed. Results and Observations

- Positive Cocaine and/or its salts (Schedule II)
- Evidence was analyzed by the following analytical methods: Scott color test and Gas Chromatography/Mass Spectrometry.
- Evidence is ready for return to department.

**Exhibit 2** Three (3) plastic bags containing powder. Powder from one (1) plastic bag analyzed. Results and Observations

- Positive Fentanyl (Schedule II)
- Positive Methoxyacetyl Fentanyl
- Evidence was analyzed by the following analytical methods: Marquis color test and Gas Chromatography/Mass Spectrometry.
- Evidence is ready for return to department.
Results From Case Reports

- Clearer picture of relationships.
- Heroin and fentanyl most prominent mixture.
- Exhibit color and testing significance.

Data Provided by RIDOH Forensic Drug Chemistry Laboratory 2018
Carfentanil Threat

• From May 2019 – present, there were 19 confirmed cases involving carfentanil in pill or powder form.

• During this timeframe, carfentanil was involved in three fatal overdose events.
Counterfeit Carfentanil Tablets
Emerging Threats: Stimulants

- Cocaine seizures in both crack and powder form continue to rise.
- Methamphetamine seizures in both tablet and crystal form have increased exponentially over the past three years.

Data Provided by RIDOH Forensic Drug Chemistry Laboratory 2018
Methamphetamine Pills
Considerations

• There is sometimes an assumption that drugs might have been distributed as mixtures (e.g., in “fentanyl-laced cocaine”) when fatal or non-fatal toxicology reports show the presence of multiple drugs.

• Seized drug reports from RIDOH’s Forensic Drug Chemistry Laboratory data show that the distribution of drugs as mixtures is generally not the case.

• However, fatal and non-fatal overdose toxicology data show that people might be using multiple substances, either at the same time or within a short period of time.
Next Steps

- Continue to closely monitor emerging drug trends with cocaine, heroin, fentanyl, and methamphetamine.

- Continue to work closely with RIDOH’s Forensic Drug Chemistry Laboratory to investigate case reports and drug relationships.
Questions?

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PUBLIC COMMENT