Nevada State Unintentional Drug Overdose Reporting System

Jan - Jun 2021 – *Jurisdiction of the Clark County Office of Coroner/Medical Examiner*

Overview: The Centers for Disease Control and Prevention (CDC) Overdose Data to Action (OD2A) is a program that supports state, territorial, county, and city health departments in obtaining more comprehensive and timelier data on overdose morbidity and mortality. The program is meant to enhance opioid overdose surveillance, reporting, and dissemination efforts to better inform prevention and early intervention strategies.

The information contained in this biannual report highlights **overdose mortality** within the counties that are overseen by the Clark County Office of the Coroner/Medical Examiner in Nevada utilizing the State Unintentional Drug Overdose Reporting System (SUDORS) for the period beginning ***January 1, 2021 to June 30, 2021***.

Data Source: SUDORS uses death certificates and coroner/medical examiner reports (including post-mortem toxicology testing results) to capture detailed information on toxicology, death scene investigations, route of drug administration, and other risk factors that may be associated with a fatal overdose.

Case Definitions: A death that occurred in Nevada where the decedent's place of residence was Nevada and was assigned any of the following ICD-10 underlying cause-of-death codes on the death certificate: X40-44 (unintentional drug poisoning) or Y10-Y14 (drug poisoning of undetermined intent); or a death classified as a drug overdose death by the Medical Examiner/Coroner. *Stimulants* speed up the body's systems and include methamphetamine, cocaine, and prescription stimulants (Adderall, Ritalin). *Benzodiazepines* are psychoactive drugs that are depressants that produce sedation, include sleep, and prevent seizures (brand names include Valium and Xanax) (DEA).

Limitations: Data is delayed due to the time required to abstract data from multiple sources. Data completeness is dependent on information documented at time of death and therefore leads to large amounts of missing data.

The report includes details on:
Section 1: Characteristics, toxicology, and circumstances of all cases
Section 2: Breakdown of characteristics and circumstances by opioids and stimulants

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Key Findings:

There were **294 drug overdose deaths** (**crude rate: 12.6 drug overdose deaths per 100,000 population**) of **unintentional or undetermined intent among Nevada residents** from **January to June, 2021:**

- Compared to the same time period in 2020, there was a **18% increase in the rate of drug overdose deaths** in 2021.
- Nearly **1 in 4 who died by drug overdose were 25-34 years old**, 58% were white, and 66% were male (Table 1).
- About **two-thirds of deaths involved an opioid** (67%) (Table 2).
- **Illicitly manufactured fentanyl and fentanyl analogs** were **involved in over 1 in 3 deaths** (37%) (Table 2).
- Over **half of deaths involved a stimulant** (58%) (Table 2).
- **Methamphetamine** was involved in **nearly half of total deaths** (47%) (Table 2).
- Almost **1 in 3 deaths involved an opioid and stimulant** (29%) (Table 4).
- **71% of decedents had at least one potential opportunity for linkage to care prior to death or implementation of a life-saving action at the time of overdose** (Table 3).

Questions or comments?

Please contact Nevada OD2A's opioid epidemiologist, Shawn Thomas, MPH, at shawnt@unr.edu.

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Section 1: Characteristics, toxicology, and circumstances of all cases

Table 1. Demographic characteristics of decedents from Nevada SUDORS among residents, Jan-Jun, 2021		
	294	**%***
Age		
<18 years	4	1.4%
18-24 years	34	11.6%
25-34 years	73	24.8%
35-44 years	48	16.3%
45-54 years	54	18.4%
55-64 years	55	18.7%
65+ years	26	8.8%
Sex		
Male	195	66.3%
Female	99	33.7%
Education		
Less than HS	42	15.2%
HS/GED	149	54.0%
Some College	40	14.5%
Associates	27	9.8%
Bachelors	16	5.8%
Masters/Doctorate	2	0.7%
Race/Ethnicity		
Black, NH	53	18.3%
Hispanic	60	20.7%
Other, NH^	10	3.4%
White, NH	167	57.6%
Note: *Missing data is excluded in percentage calculations. ^Other race includes Asian, Pacific Islander, Native American, Alaskan Native, and those identifying as other race.		

Table 2. Toxicology and suspected route of administration from Nevada SUDORS among residents, Jan-Jun, 2021		
Substance Type	**294[a]**	**%[a]**
Any Opioids[b]	197	67.0%
IMFs[c]	108	36.7%
Prescription Opioids	62	21.1%
Heroin	44	15.0%
Any Stimulants[d]	171	58.2%
Methamphetamine	139	47.3%
Cocaine	35	11.9%
Other Substances		
Benzodiazepines	51	17.3%
Alcohol	38	12.9%
Antidepressants	10	3.4%
Diphenahydramine	12	4.1%
Gabapentin	14	4.8%

Kratom	10	3.4%
Suspected route of administration[e]		
Evidence of ingestion	72	26.4%
Evidence of smoking	118	43.2%
Evidence of injection	47	17.2%
Evidence of snorting/sniffing	32	11.7%

Note: [a]Substances above are those listed as cause of death (COD) and are not mutually exclusive (decedents may have had more than one substance contributing to death). [b]Any opioids include the number of deaths where any type of opioid (illicit or prescription) contributed to death. [c]IMFs=Illicitly manufactured fentanyl and fentanyl analogs. [d]Any stimulants include the number of deaths where any type of stimulant (illicit or prescription) contributed to death. [e]Suspected route of administration information is based on information documented during the death scene investigation, and due to limited information on scene in some investigations, may underestimate their occurrence.

Table 3. Circumstances and other characteristics of decedents in Nevada SUDORS among residents, Jan-Jun, 2021

Circumstances documented	**273**	**%**
Current or past substance use/misuse	213	78.0%
Overdose occurred in the decedent's home	212	77.7%
Bystander present[%]	163	59.7%
Mental health diagnosis[%]	91	33.3%
Naloxone administered	60	22.0%
Current pain treatment	46	16.8%
Fatal drug use witnessed[%]	26	9.5%
Ever served in U.S. Armed Forces	23	8.4%
Recent release from institution[%]	22	8.1%
Prior overdose (within past year)	21	7.7%
Homeless	20	7.3%
Ever treated for substance use disorder[%]	16	5.9%
Recent opioid use relapse	14	5.1%

Note: Based on information documented during the death scene investigation, and due to limited information on scene in some investigations, may underestimate their occurrence. Percentages use the denominator of those who had known circumstances (N=273). [%]Potential opportunity for life-saving action includes recent release from an institution within past month (prison/jail, treatment, hospital), previous nonfatal overdose, mental health diagnosis, ever treated for substance use disorder, bystander present when fatal overdose occurred, and fatal drug use witnessed.

Summary: There were 294 drug overdose deaths of unintentional/undetermined intent from January to June, 2021 in Nevada among residents within the jurisdiction of the Clark County Office of the Coroner/Medical Examiner. Decedents were mostly between the ages of 25-34 (24.8%), mostly male (66.3%), possessed a high school degree or equivalent (54.0%), and were White, non-Hispanic (57.6%) (**Table 1**).

Over 2 in 3 deaths involved an opioid (67.0%), over half of deaths involved a stimulant (58.2%), and 29.3% of deaths involved both an opioid and stimulant. Illicitly manufactured fentanyl and fentanyl analogs contributed to over 1 in 3 deaths (36.7%). Methamphetamine contributed to nearly half of deaths (47.3%). The suspected route of administration for substances were as follows: evidence of smoking (43.2%), evidence of oral ingestion (26.4%), evidence of injection (17.2%), and evidence of snorting/sniffing (11.7%) (**Table 2**).

The top five circumstances documented among decedents were having a current or past substance use/misuse history (78.0%), overdose occurring in the decedent's home (77.7%), having a bystander present at the time of overdose (59.7%), having a mental health diagnosis (33.3%), and having naloxone administered (22.0%) (**Table 3**).

Section 2: Breakdown of characteristics and circumstances by opioids and stimulants

Table 4. Demographic characteristics of decedents from Nevada SUDORS among residents by substance type, Jan-Jun, 2021

	Opioid		Stimulant		Opioid + Stimulant	
	197	**%***	**171**	**%***	**86**	**%***
Age						
<18 years	4	2.0%	1	0.6%	1	1.2%
18-24 years	28	14.2%	14	8.2%	9	10.5%
25-34 years	61	31.0%	40	23.4%	28	32.6%
35-44 years	30	15.2%	28	16.4%	13	15.1%
45-54 years	32	16.2%	41	24.0%	21	24.4%
55-64 years	26	13.2%	32	18.7%	9	10.5%
65+ years	16	8.1%	15	8.8%	5	5.8%
Sex						
Male	122	61.9%	114	66.7%	49	57.0%
Female	75	38.1%	57	33.3%	37	43.0%
Education						
Less than HS	29	15.7%	22	13.6%	12	14.5%
HS/GED	103	55.7%	91	56.2%	49	59.0%
Some College	23	12.4%	24	14.8%	10	12.0%
Associates	17	9.2%	16	9.9%	7	8.4%
Bachelors	12	6.5%	8	4.9%	5	6.0%
Masters/Doctorate	0	0.0%	1	0.6%	0	0.0%
Race/Ethnicity						
Black, NH	28	14.4%	34	20.0%	12	14.0%
Hispanic	48	24.7%	28	16.5%	17	19.8%
Other, NH^	5	2.6%	9	5.3%	4	4.7%
White, NH	183	65.1%	163	64.9%	81	68.6%

Note: *Missing data is excluded in percentage calculations. ^Other race includes Asian, Pacific Islander, Native American, Alaskan Native, and those identifying as other race.

Table 5. Circumstances and other characteristics of decedents in Nevada SUDORS among residents, Jan-Jun, 2021

	Opioid		Stimulant		Opioid + Stimulant	
Circumstances documented	**189**	**%**	**155**	**%**	**82**	**%**
Current or past substance use/misuse	153	81.0%	119	76.8%	67	81.7%
Overdose occurred in the decedent's home	153	81.0%	108	69.7%	58	70.7%
Bystander present	119	63.0%	95	61.3%	56	68.3%
Mental health diagnosis	69	36.5%	42	27.1%	24	29.3%
Naloxone administered	48	25.4%	27	17.4%	16	19.5%
Current pain treatment	39	20.6%	12	7.7%	8	9.8%

Fatal drug use witnessed	20	10.6%	19	12.3%	14	17.1%
Prior overdose	19	10.1%	6	3.9%	5	6.1%
Recent release from institution	15	7.9%	15	9.7%	8	9.8%
Ever treated for substance use disorder	14	7.4%	7	4.5%	5	6.1%
Recent opioid use relapse	14	7.4%	7	4.5%	7	8.5%
Ever served in U.S. Armed Forces	12	6.3%	13	8.4%	3	3.7%
Homeless	9	4.8%	16	10.3%	7	8.5%

Note: Based on information documented during the death scene investigation, and due to limited information on scene in some investigations, may underestimate their occurrence. Percentages use the denominator of those who had known circumstances for each substance breakdown. [%]Potential opportunity for life-saving action includes recent release from an institution within past month (prison/jail, treatment, hospital), previous nonfatal overdose, mental health diagnosis, ever treated for substance use disorder, bystander present when fatal overdose occurred, and fatal drug use witnessed.

Summary: There were 197 deaths where opioids contributed, 171 deaths where stimulants contributed, and 86 deaths where opioids and stimulants contributed to drug overdose deaths of unintentional/undetermined intent from January to June, 2021 in Nevada among residents within the jurisdiction of the Clark County Office of the Coroner/Medical Examiner (**Table 4**).

Opioids: Decedents were mostly between the ages of 25-34 (31.0%), mostly male (61.9%), possessed a high school degree or equivalent (55.7%), and were White, non-Hispanic (65.1%) (**Table 4**). The top five circumstances documented among decedents were having a current or past substance use/misuse history (81.0%), overdose occurring in the decedent's home (81.0%), having a bystander present at the time of overdose (63.0%), having a mental health diagnosis (36.5%), and having naloxone administered (25.4%) (**Table 5**).

Stimulants: Decedents were mostly between the ages of 45-54 (24.0%), mostly male (66.7%), possessed a high school degree or equivalent (56.2%), and were White, non-Hispanic (64.9%) (**Table 4**). The top five circumstances documented among decedents were having a current or past substance use/misuse history (76.8%), overdose occurring in the decedent's home (69.7%), having a bystander present at the time of overdose (61.3%), having a mental health diagnosis (27.1%), and having naloxone administered (17.4%) (**Table 5**).

Opioid + Stimulants: Decedents were mostly between the ages of 25-34 (32.6%), mostly male (57.0%), possessed a high school degree or equivalent (59.0%), and were White, non-Hispanic (68.6%) (**Table 4**). The top five circumstances documented among decedents were having a current or past substance use/misuse history (81.7%), overdose occurring in the decedent's home (70.7%), having a bystander present at the time of overdose (68.3%), having a mental health diagnosis (29.3%), and having naloxone administered (19.5%) (**Table 5**).