OPIATE CRISIS
QUARTERLY REPORT
QUARTER 4 (OCT-DEC), 2017
FRANKLIN COUNTY, OHIO

DRUG OVERDOSE EPIDEMIC
Central Ohio is experiencing a drug epidemic. This quarterly report provides a snapshot of the most up-to-date data on drug overdose treatment and infectious disease in Franklin County.

HARM REDUCTION PROGRAM
Columbus Public Health, in collaboration with other community partners, has launched a comprehensive Harm Reduction Program to lessen the impact of addiction to heroin and other opiates. This partnership is working to save lives, help people recover and stop the spread of disease through drug abuse prevention education, counseling, testing, and access to syringes and naloxone. These efforts are expected to have many positive impacts such as lowering rates of blood borne diseases like HIV and Hepatitis C, keeping used syringes off the streets, and connecting people in crisis with substance use services. Learn more at www.columbus.gov/harm.

In Franklin County, there was a 423% increase in residents who died from unintentional drug overdoses from 2003 to 2016.

UNINTENTIONAL DRUG OVERDOSE DEATHS
Unintentional drug overdose deaths are on the rise. This section includes data on rates of unintentional overdose deaths in Ohio and Franklin County.

AGE-ADJUSTED DEATH RATE FROM UNINTENTIONAL DRUG OVERDOSE BY YEAR, 2012-2016

In Franklin County, there was a 423% increase in residents who died from unintentional drug overdoses from 2003 to 2016.

Nearly 400* Franklin County residents died from unintentional drug overdoses in 2017, surpassing the number of deaths in 2016.

*2017 mortality data is preliminary.
TREATMENT BY EMERGENCY MEDICAL SERVICES (EMS)*

This section includes data of patients treated by Columbus City EMS for suspected drug poisoning/drug ingestion.

*Beginning in Quarter 1, 2017 data were received from Columbus Division of Fire.

PATIENTS WITH DRUG OVERDOSE TREATED BY EMS BY QUARTER (N=3,323)

BY AGE GROUP
Quarter 4, 2017 (N=758)

BY RACE
Quarter 4, 2017 (N=758)

DRUG OVERDOSES & NALOXONE

Overdoses can have serious complications if untreated. Naloxone is a medicine commonly administered by EMS to counteract an overdose.

EMERGENCY DEPARTMENT (ED) VISITS

This section includes data for patients who presented in Franklin County EDs with chief complaints that mention overdose.

OVERDOSES IN ED BY MONTH (N=4,886)

BY AGE GROUP
Quarter 4, 2017 (N=1,117)

BY RACE
Quarter 4, 2017 (N=1,117)
NEONATAL ABSTINENCE SYNDROME (NAS)

This section includes Franklin County resident babies with a diagnosis of Neonatal Abstinence Syndrome (NAS). NAS is a set of symptoms associated with the abrupt withdrawal of opioids and other drugs when infants are born to mothers who were taking these substances.

Babies Diagnosed with NAS by Quarter (N=161)

BY RACE†
Jan-Dec 2017 (N=161)

Over the past year (January-December 2017), 283 babies were treated for NAS in Franklin County. Of these, 161 (57%) were residents of Franklin County.

SYRINGE USE & DISEASE SPREAD

People who inject drugs without a clean syringe are at risk for Hepatitis C and other infections. The number of Hepatitis C cases in Franklin County is increasing.

Hepatitis C Cases by Month (N=2,360)

BY AGE GROUP
Quarter 4, 2017 (N=595)

ABOUT THE DATA: All current and historical figures are preliminary and subject to change as new/updated information is received. All data are received by facility location with the exception of hepatitis data which is received by county of residence. Mortality Data are downloaded from the Ohio Public Health Data Warehouse. Columbus Fire EMS data were received from Columbus Division of Fire. Data is reflective of EMS patients who received at least one dose of naloxone. Current and preliminary Neonatal Abstinence Syndrome data were received from facilities in Franklin County. Mortality data includes Franklin County resident babies with a clinical diagnosis or admitting chief complaint of NAS (ICD10: P96.1). Current and preliminary hepatitis data (2016 and after) are downloaded from the Ohio Disease Reporting System by date of report to CDC. Analysis is completed by the Office of Epidemiology at Columbus Public Health. Only patients with complete data were included in analyses.

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