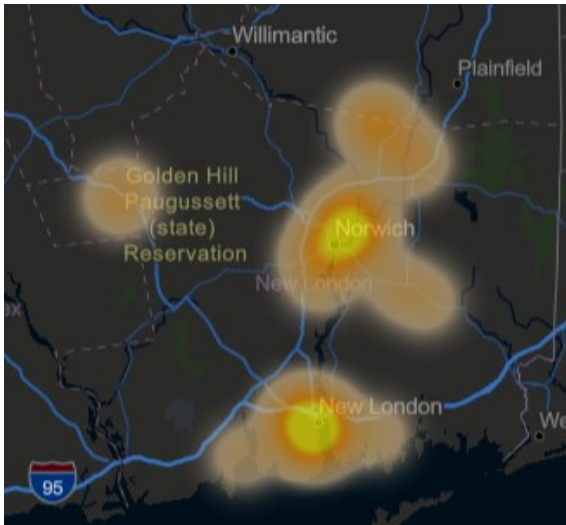
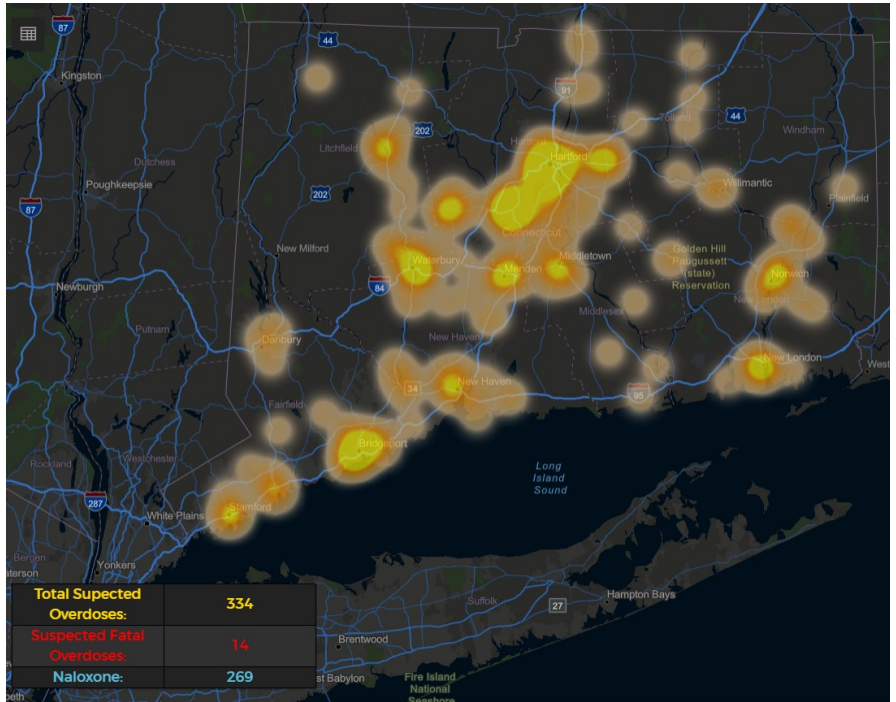


CT Opioid Heat Map

In the month of February the State of Connecticut saw increased activity in Hartford and New London Counties. The heatmaps depicted, at right, and below show cumulative data for the month of February 2021.

According to the SWORD annual report there are 5 agencies actively utilizing SWORD data to inform public health programming within New London County.



New London County Heat Map, for February 2021

SWORD Spotlight

Kudos to Hunter’s Ambulance, New Britain EMS, and South Manchester FD who all achieved

100% compliance in the month of January. Your continued diligence, is appreciated.

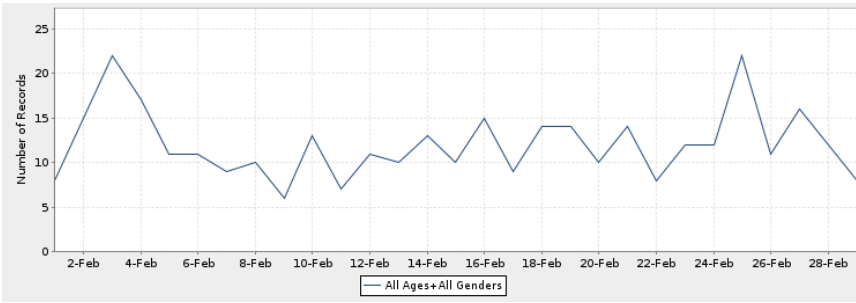
Consistent and committed reporting translates into real outcomes as local public health entities, and their community partners look to ODMAP for real time data relating to opioid overdoses.



ODMAP Data Referenced for Critical Community Messaging Campaign

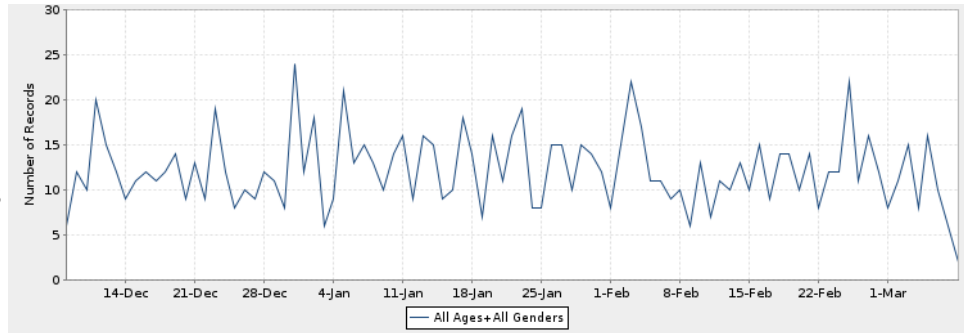
The Alliance for Prevention and Wellness, a program of BHCare, based in North Haven, Connecticut, works to make ODMAP data actionable. They serve a thirty-six-town region, covering about 850,000 residents. The Alliance for Prevention and Wellness in collaboration with CT High Intensity Drug Trafficking referenced ODMAP data, and partnered with community stakeholders, in order to implement novel messaging campaigns, in response to the opioid crisis. They were able to filter for hotspot zip codes, which then steered the purchase of mailing lists from those areas.

Pam Mautte, is the Division Director for the Alliance for Prevention and Wellness, stated that they chose to link their targeted mailings to some already existing National and Statewide campaigns like Change the Script, [CHANGE the SCRIPT \(ct.gov\)](http://CHANGEtheSCRIPT.ct.gov), Live Loud, [LiveLOUD - Life with Opioid Use Disorder](http://LiveLOUD-LifeWithOpioidUseDisorder), and NORA Saves, [NORA - Naloxone + Overdose Response App \(ct.gov\)](http://NORA-Naloxone+OverdoseResponseApp.ct.gov).



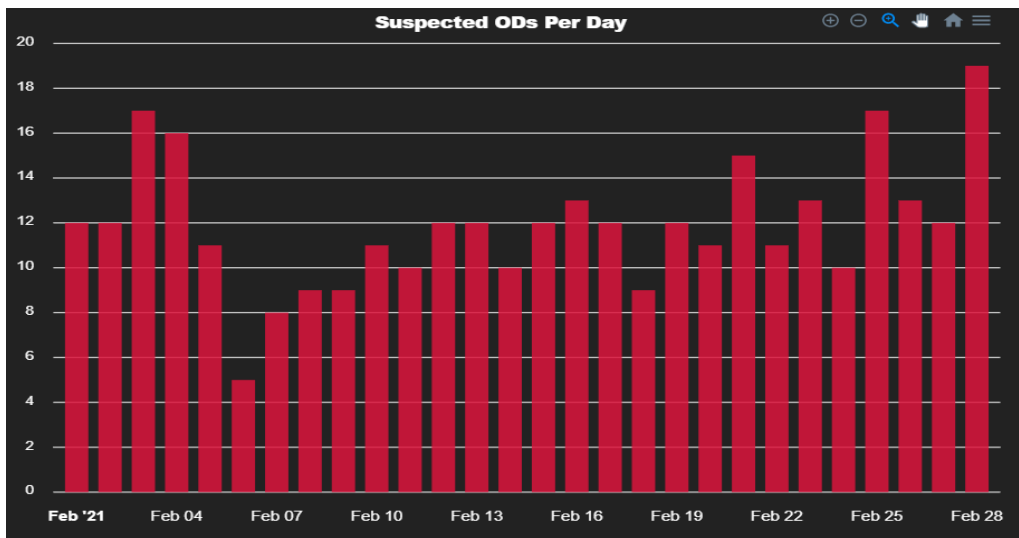
Left: > Total count of emergency department visits related to suspected overdoses with any opioid*. This data shows counts for Feb 2021 for the state of Connecticut.

Right: > Total count of emergency department visits related to suspected overdoses with any opioid*. This data shows total counts for the previous 90 days for the state of Connecticut.



Data, above, represents the total count of emergency department visits (Syndromic Surveillance) related to prescription and illicit opioid drug overdoses. Data reflects overdoses based on town/city resident. It does not include non-resident overdoses. Data subject to change.

*Suspected overdoses involving any opioid include prescription and illicit opioids.



The graph, at left, represents EMS reported opioid overdoses by incident day during February.

SWORD Statewide Reporting February 2021

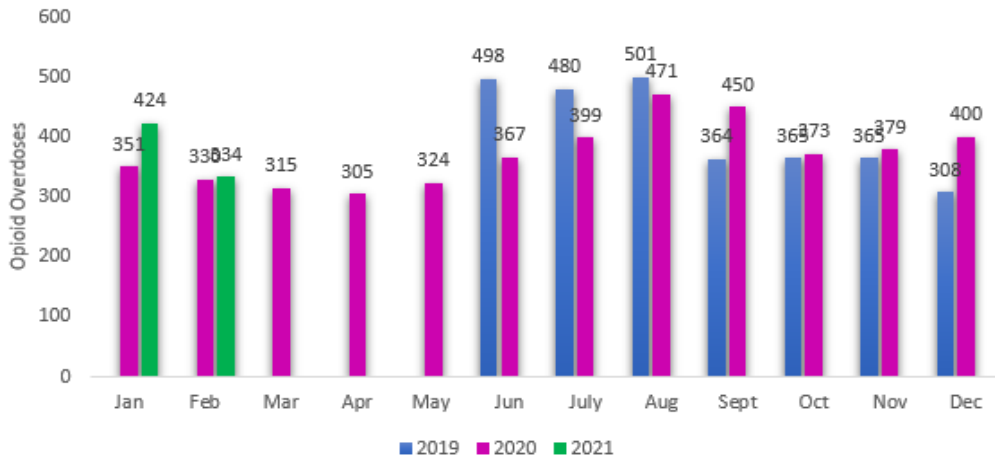
In the month of February 2021, there were 334 calls to the CT Poison Control Center (CPCC) for SWORD. Of these calls, 320 were non-fatal and 14 resulted in fatalities. There were 269 total naloxone administrations: 135 non-fatal multiple doses of naloxone administered, 127 non-fatal single dose naloxone, and 58 non-fatal with no naloxone administered. There were zero (0) non-fatal with “unknown” naloxone administered. Of the 14 fatalities, eight (5) received multiple doses of naloxone, two (2) received single dose, and seven (7) with no naloxone administered. The gender breakdown for the state is: Male (237); Female (88) and (3) unknown.

334 cases involved suspected overdoses from all of our counties: Fairfield (56), Hartford (139), Litchfield (15), Middlesex (18), New Haven (57), New London (34), Tolland (5), and Windham (4). The age breakdown of the patients is as follows: 0 to 18 years of age (3); 19 to 24 years of age (27); 25 to 34 years of age (94); 35 to 44 years of age (81); 45 to 54 years of age (62); 55 to 64 years of age (37); 65 years of age and older (16); age unknown (14).

*Numbers subject to change

***TIP: Store the CPCC number in your cell for ease of use! 1-800-222-1222**

Suspected OD's by month June 2019-February 2021



Left: > This graph shows the total suspected overdoses (fatal and non-fatal) called into CPCC by month since June 2019

(These numbers were transcribed from the ODMAP database system 3/5/2021)

The Statewide Reporting Directive began across the State on June 1, 2019

Mautte went on to say that the Alliance for Prevention and Wellness also partnered with local businesses, launched a placemat campaign, and has planned sidewalk stickers. The placemats are visible in local restaurants and display images from various campaigns. Due to the winter weather, the sidewalk stickers are pending. Once the weather cooperates, the plan is to install them. Safety was a priority while designing the sidewalk stickers, so the stickers have been created with grit to prevent citizens from slipping when walking over the surface on a wet day. The idea with sidewalk stickers is they will be visibly prominent as people are glancing down at their phones, while walking down the street.

One of the most novel installations came in the form of street signs, which were installed in areas of high overdose occurrence. The overdose hotspots have been identified by reviewing ODMAP data, along with other data sources. The signs contain resource information for persons with opioid use disorder, or any substance use disorder. The signs are the size of the average No Parking sign.

The metrics for success is a “work in progress,” according to Mautte. However, they have been able to demonstrate that the referenced websites in their mailings and other campaigns, have all accounted for increased activity, associated with the target zip codes. Some of the help lines referenced, have also reported increased contacts originating from those same zip codes.

They continue to innovate with their coffee sleeve campaign, which bears the message “Dig

LET'S PUT A LID ON



PRESCRIPTION DRUG MISUSE

- Prescription drugs can be deadly. So store them safely.
- More than 50% of opioid misuse originates with excess pills being used by others who have access.
- Store all prescription drugs in a locked container.
- Keep track of the exact number of pills in every container.
- Talk to children about the seriousness and hazards of using prescription drugs.
- Dispose of excess prescription drugs properly.

RESOURCES

Drugfreect.org
bit.ly/DrugDropBoxLocations
 substance abuse treatment
 1.800.563.4086







Questions to Ask your Doctor or Pharmacist about your Medication

1. Why am I being prescribed this medication?
2. How much of this medication do I take and for how long?
3. How will this interact with my other medications?
4. What are the side effects?
5. What are other options for managing pain?

CHANGE the SCRIPT

drugfreect.org

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CHANGE the SCRIPT

drugfreect.org

YOU ARE NOT ALONE.

liveloud.org • 1.800.563.4086

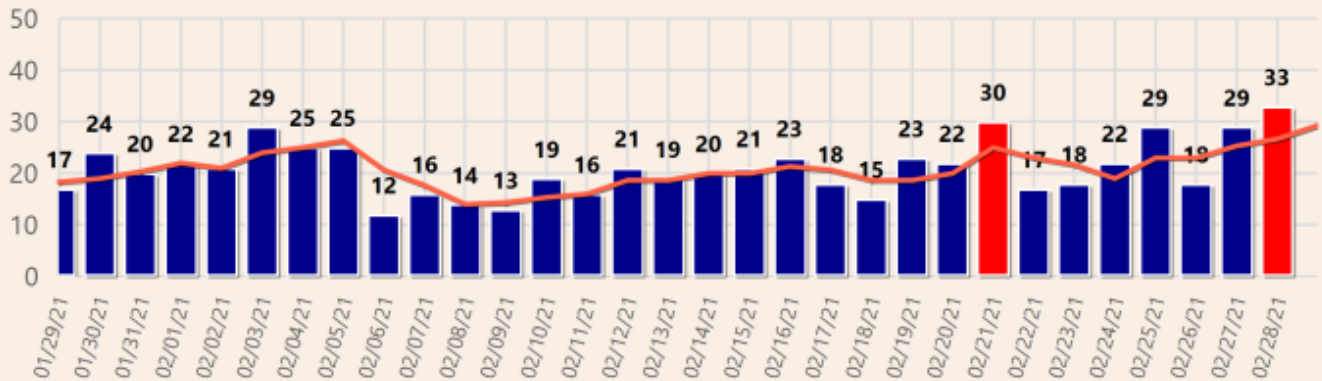
Visit www.liveloud.org for LiveLOUD Live Chat

Placemat/Menu Advertising

Deep and Never Give Up.” Great advice for anyone impacted by the opioid crisis. The programs described by the Alliance for Prevention and Wellness are creative ways of employing time-honored methods of communication, direct mail, and point of service messaging, and one can only hope that they continue to make a difference.

ODMAP Suspected Overdose Submissions - In the Last Month

■ Entries Per Day — 3-Day Moving Avg



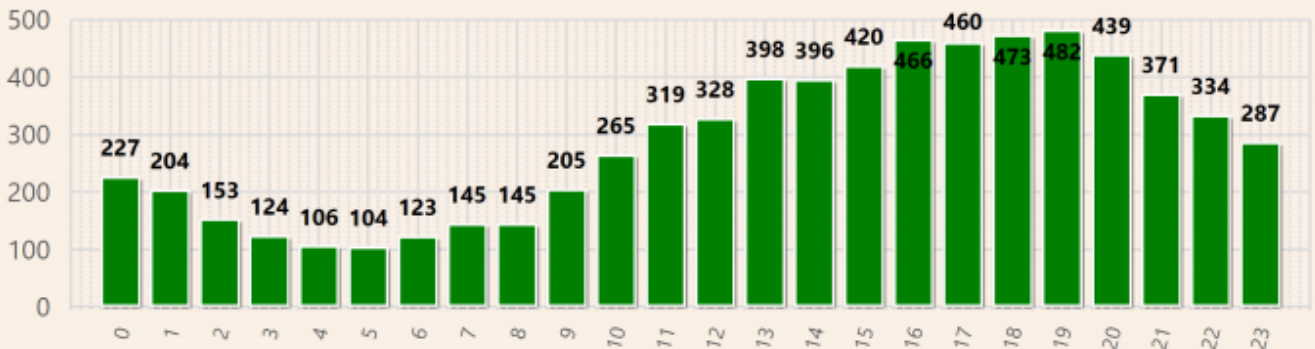
These counts represent the number of overdoses reported to ODMAP and are not official counts.

ODMAP Suspected OD Submissions by day.

This graph shows total suspected overdoses called in each day during the time period. The red line running horizontally shows a 3-day moving average of call-ins.

ODMAP Suspected Overdose Submissions - All Data Submitted

■ Per Hour of the Day



Hour of the Day - Incident Time

Cumulative (June—February, 2021) Overdoses by the Hour of the Day

This graph shows the hour of the day suspected overdose incidents have occurred statewide since the SWORD program began on June 1, 2019.

Note: All data in this newsletter come from reports made by CT EMS and can be viewed in ODMAP Level 2

Data a Deeper Dive:

Frequency of Fatal Overdose after Nonfatal Overdoses

There has been discussion in the state legislature over a proposal allowing police to take patients into custody who have been revived with naloxone and then refuse transport to the hospital. Some supporters of the bill have cited cases of people who overdosed, refused transport to the hospital and then subsequently overdosed again and died. Using Connecticut's Statewide Opioid Reporting Directive (SWORD) data of EMS reported overdoses, we examined the records of patients who suffered a nonfatal overdose in the year prior to their fatal overdose to determine how common nonfatal overdoses were in that time period and how common transport refusals were in the week prior to their fatal overdoses.

Methods: We retrospectively examined all SWORD reported overdose fatalities during the nine month period June 1, 2020 to February 28, 2021 and cross checked by name and birth date to see if the patients had a previous SWORD reported opioid overdose at any time during the previous 12 months to their death. We also looked at if there had been a nonfatal overdose within the week prior to a fatal overdose and/or if transport to the hospital had been refused.

Results: During the period reviewed there were 219 SWORD reported fatal overdoses. Of these, 182 had identified names that could be crosschecked with SWORD records. (John and Jane Does were excluded). Of the 182 people who were reported to have a fatal overdose, 29 (16%) had earlier overdoses reported to SWORD in the 12 months prior to their death. Seven patients (4%) had two other overdoses, and seven (4%) had three other overdoses. Three patients (2%) had four previous overdoses, two (1%) had five previous reported overdoses, and one each (0.5%)

had six and seven reported overdoses. Seven (2%) had overdosed in the week prior to their death. One (0.5%) overdosed within twenty-four hours of his fatal overdose. Of the seven who had overdosed in the week prior to their deaths, only one had refused transportation after their nonfatal overdose.

Limitations: SWORD data typically underreports fatal overdoses as EMS often cannot make a definitive determination of cause of death. Patients in this study could have had additional overdoses that were either unreported by EMS or in which 911 was not activated.

Conclusion: Sixteen percent of fatal overdoses had a SWORD reported nonfatal overdose in the year prior to their deaths. Of the 182 SWORD reported fatalities only one had suffered an overdose in the previous week and refused transportation to the hospital. Nonfatal opioid overdose with refusal of transportation in the week prior to a patient's fatal overdose appears rare.

Glassine Bags



Glassine heroine bags of Devil Around, Peace Pipe, & Pandamonium are pictured above. Other bags that have been identified in Connecticut include: Howl, Venom, & Red Ski Mask.

Do you need help accessing ODMAP Level 1 (Spike Alert Level) or Level 2 (Map Level)?

[Click here to contact the ODMAP Helpdesk](#), or call (301) 489-1744



410 Capitol Ave
Hartford, CT 06134
860-509-7975

Department of Public Health

Office of Emergency Medical Services

[Click here](#) to contact OEMS regarding the SWORD program,

ODMAP, or feedback, [Click here](#) to check out the SWORD page on our website

Thank you for your participation!

