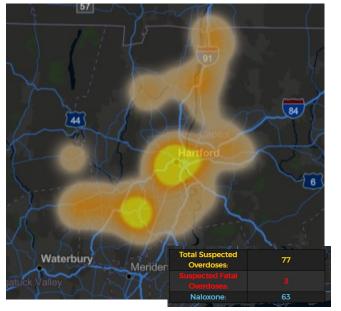
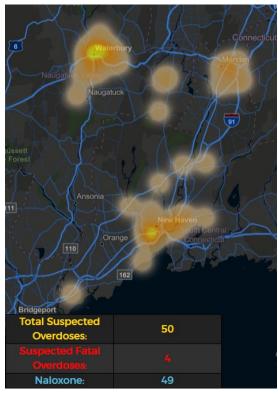


March 2024, Issue LVIII

Hartford & New Haven Counties



Increased activity was noted in Hartford County (above), and New Haven (below), as reflected in calls made to the Connecticut Poison Control Center as part of the SWORD program. Data depicted provides results for February of 2024.



Second Year Decline in Opioid Deaths

Connecticut Opioid Related deaths declined for the second year in a row, down 14% from their 2021 high of 1431 opioid deaths, according to the latest statistics from the Connecticut Office of the Medical Examiner (OCME). Opioid deaths represented 92% of all overdose deaths in Connecticut. Fentanyl was present in 92% of these deaths.

While the decline is good news, the number of people in our state (1217) succumbing to opioid deaths is still achingly high. EMS has a pivotal role in helping to combat these deaths, both but providing resuscitation with naloxone, but also in helping steer those resuscitated patients toward treatment and harm reduction resources. Empathy is the hallmark of an EMS provider and this ability to see life through their patient's eyes and treat them with respect and dignity can go a long way toward helping them get the aid they need to help them stay alive as they battle the terrible disease of addiction and the perils of drug use.

Fentanyl represents the third and most deadly wave of the opioid epidemic, following wave one of prescription pills and wave two – heroin. Fentanyl is deadly because when drug dealers add it to the drug supply it is mixed inconsistently. The inability of users to safely judge how much active ingredient they are exposing themselves to makes overdose random, and if a person used fentanyl alone, they can easily be poisoned and die without anyone to witness the overdose and provide naloxone.

There is discussion of the country entering a fourth wave of the epidemic which combines fentanyl use with stimulants such as cocaine and methamphetamine. Cocaine present in any death has risen each of the last ten years. In 2023, cocaine was present in 54% of all overdose deaths and 55% of all fentanyl deaths. It is

Second Year Decline cont. from pg. 1

unknown to what extend the cocaine contributed to these deaths. Presence of cocaine does not mean that the cocaine caused the death, nor does it mean that the cocaine and fentanyl were mixed together, only that the person who died had cocaine in their system. Many people who use fentanyl, also routinely use cocaine. Fentanyl remains the most likely cause of these deaths due to causing sudden respiratory depression and arrest.

Xylazine, an animal tranquilizer, has received much attention in Connecticut in

the last two years for its increasing presence in overdose deaths, going from 0 in 2018 to a high of 351 in 2022. In 2023, xylazine presence in fatal overdoses decreased by 8% to 286. As with cocaine, it is hard to determine the extent to which the presence of xylazine contributed to the actual death or whether it is was simply a reflection of the percentage of xylazine in the drug supply. In 2022, while xylazine's presence went up, deaths with xylazine present went down.

The SWORD program has been used to track overdoses in Connecticut. SWORD reported overdoses dropped by 15% in 2023 over 2002 and were down 26% from 2022. SWORD is reliant on provider compliance, which has been estimated at between 50% and 70%, so SWORD has not been a reliable marker of the number of overdoses that EMS responds to. It has been helpful in showing a representative sampling of who is overdosing

Connecticut Opiod Deaths Decline 14% from 2021 High Second Year of Improvement/Fentanyl Present in 85% of Deaths 1800 1600 1400 1200 1000 800 600 400 200 0 2012 2013 2015 2021 2023 2014 2016 2017 2018 2019 2020 2022 357 495 568 729 917 1038 1017 1200 1374 1524 1452 1329 Overdose Deaths Opioid Deaths 298 419 513 663 861 961 948 1127 1273 1413 1339 1217 -Fentanyl Deaths 979 1312 37 75 189 483 677 748 1159 1253 1124 14 Overdose Deaths Opioid Deaths Fentanyl Deaths

and where, as well details of the overdoses.

The SWORD program will be replaced later this year with the DPH API to ODMAP (currently being tested), which is providing automatic exports of overdoses based on transmission of the PCRs. This should address the compliance issue. It will still be important for EMS to write detailed narratives describing the overdoses as these will be reviewed on a regular basis to help surveille the epidemic.

While we can be heartened by the decrease in fatal overdoses, we must recognize the number is still terribly high and we must continue to do all we can to provide life -saving treatment, report quality data, and use of position as EMS responders to encourage people who use drugs to seek treatment and utilize harm reduction resources.

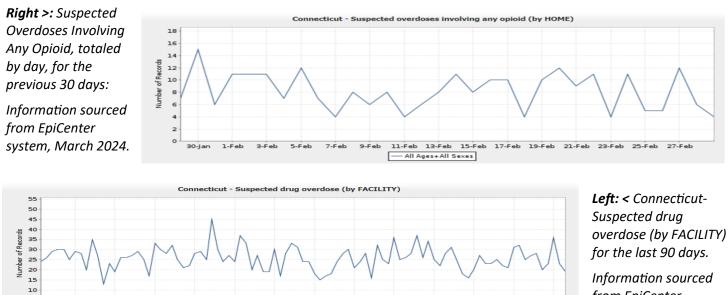
February ImageTrend Data

There were 518 EMS reported overdoses in February. At 17.9 overdoses a day, it was down slightly from January's 565 (18.2 per day).

The average age of overdose patients was 45.8. The male female ratio was 72/28. The racial mixture when race was reported was 51% white, 26% black or African American and 23% Hispanic or Latino.

The top three zip codes for overdose in February were 06511-New Haven (35), 06106-Hartford (29) and 06513-New Haven (25). Overdoses were recorded in 124 different zip codes during the month.

Repeat Overdoses- Of the 492 reported overdoses who had identified names (John Does were excluded), 18 people were identified as repeat overdose patients during the month. This represented 3.8% of all patients. One patient overdosed 3 times.



16-Jan

23-Jan

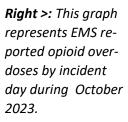
30-Jan

6-Feb

9-Jan

– All Ages+All Se×es

from EpiCenter system, March of 2024.



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5-Dec

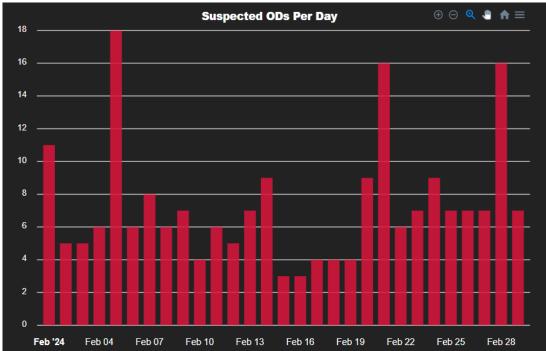
12-Dec

19-Dec

26-Dec

2-Ja

This graph was sourced from OD-MAP in March 2024.



13-Feb

20-Feb

27-Feb

SWORD Statewide Reporting February 2024

In the month of February 2024, there were 212 calls to the Connecticut Poison Control Center (CPCC) for SWORD. Of these calls, 201 were non-fatal and 11 were reported as fatalities. There were 181 total naloxone administrations: 87 non-fatal multiple doses of naloxone administered, 88 non-fatal single dose naloxone, 26 non-fatal with no naloxone administered and zero non-fatal naloxone administration unknown. Of the 11 fatalities, four received multiple doses of naloxone, two received a single dose, and five with no naloxone administered.

The 212 cases involved suspected overdoses from all of our counties: Fairfield 35, Hartford 77, Litchfield eight, Middlesex 16, New Haven 50, New London 18, Tolland four and Windham four.



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.



Cumulative (June 2019—February 2024) 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.

Do you need help accessing ODMAP Click here to contact the ODMAP Helpdesk, or call (301) 489-1744

