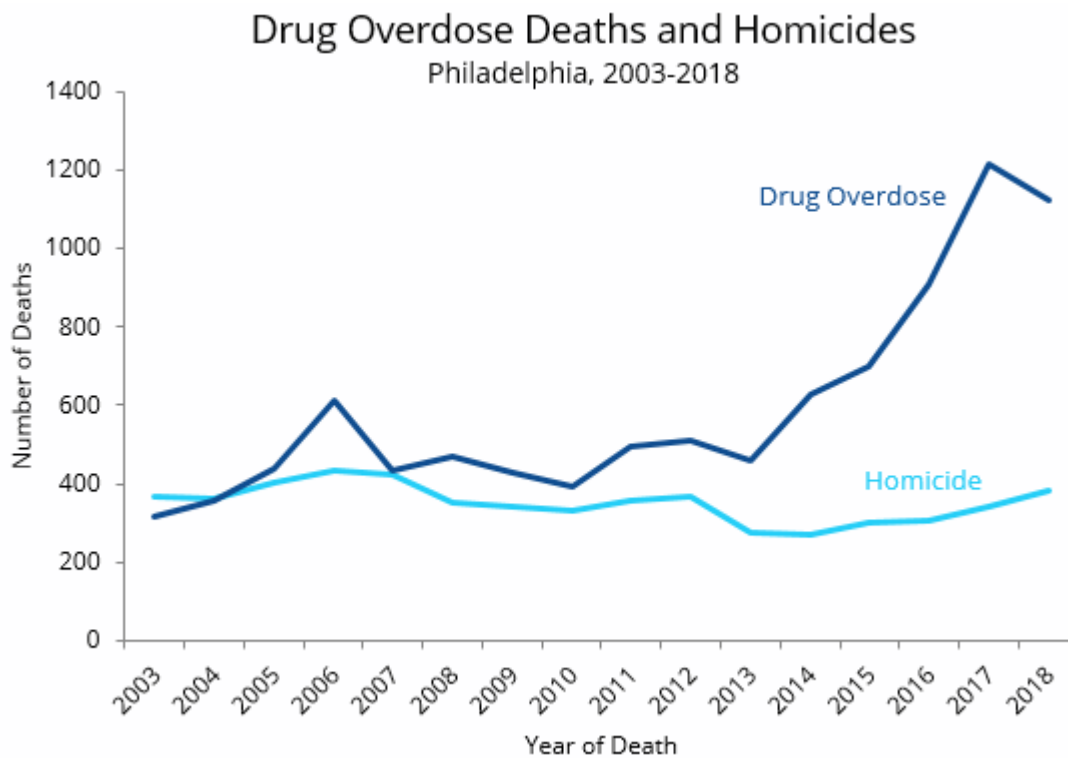




Fatal Drug Overdoses in Philadelphia, 2018

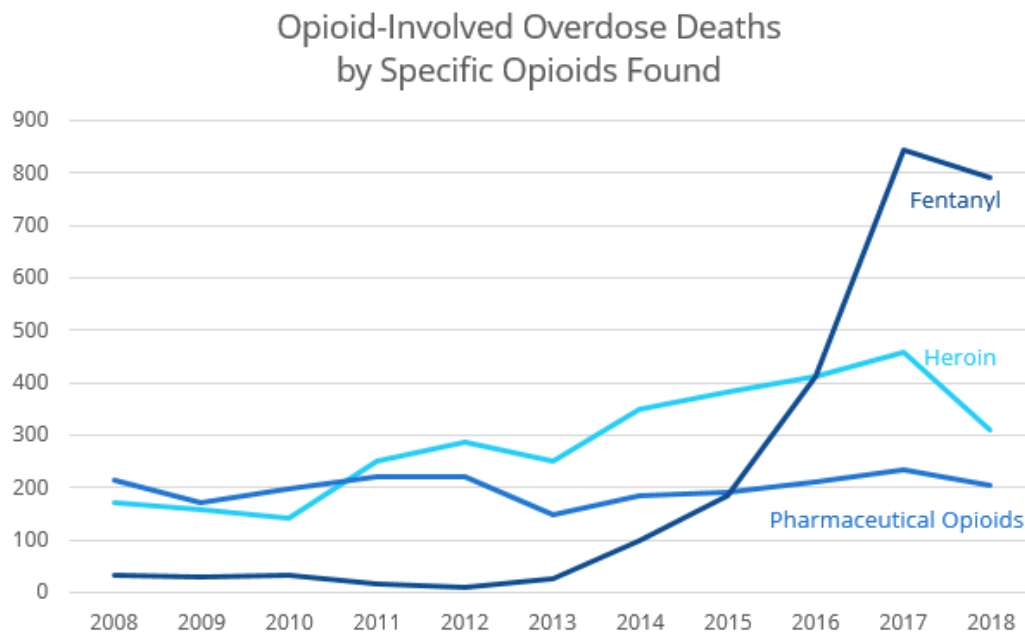
Philadelphia has taken many steps to respond to the crisis of opioid addiction and overdose. This issue of CHART summarizes trends in fatal drug overdoses through 2018, based on data from the Medical Examiner's Office.

Drug overdoses declined 8% in 2018



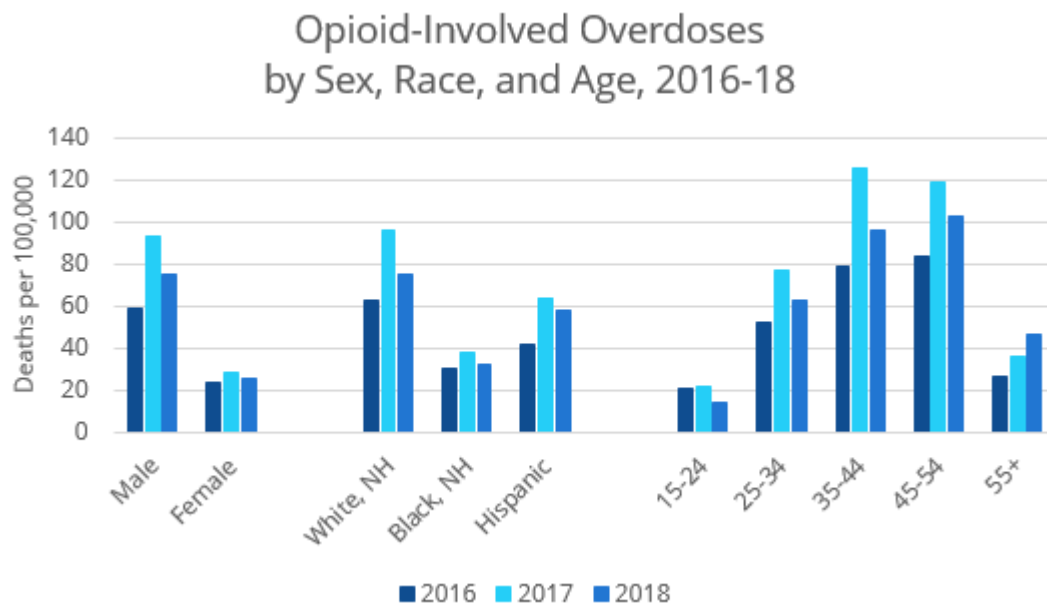
- 1,116 people in Philadelphia died of drug overdose in 2018. Although this number is more twice as high as deaths in 2013, it represents an 8% decline from the year before.
- Opioids were detected in 84% of overdose victims, which was similar to 2017.

Fentanyl remains the leading cause of opioid-involved overdose death



- After rising sharply in recent years, deaths involving fentanyl fell slightly in 2018. Nonetheless, fentanyl was found in 84% of overdose deaths in which any opioid was found.
- Deaths involving pharmaceutical opioids (such as oxycodone and hydrocodone) remained relatively constant (207 deaths in 2018); for most of these deaths, fentanyl or heroin was also present.

Overdose death rates continue to be elevated for all demographic groups



- Overdoses involving opioids continued to occur in all gender, race/ethnicity, and age groups. However, overdose death rates were about three times as high in males as females, peaked in ages 35-54, and were higher in non-Hispanic whites and Hispanics than non-Hispanic blacks.
- Death rates fell from 2017 to 2018 in all demographic groups except persons above age 55.

What can be done

The City of Philadelphia is:

- Working with health systems and health care providers to reduce over-prescribing of pharmaceutical opioids.
- Warning consumers about the inherent risks of prescription opioids.
- Increasing the availability of medication-assisted treatment through primary care practices, specialized substance use treatment providers, and the Philadelphia prison system.
- Promoting medication-assisted treatment with its BupeWorks media campaign.
- Working with hospitals to implement “warm handoffs” to treatment for persons who had a non-fatal overdose.
- Conducting a media campaign that encourages Philadelphians to carry the opioid overdose antidote naloxone (Narcan™) and offering free naloxone trainings.
- Distributing naloxone to organizations serving at-risk populations (including syringe exchange, law enforcement, and prison systems).
- Addressing the adverse neighborhood and community consequences of the rise in opioid addiction through the Philadelphia Resilience Project.

Health care providers can:

- Prescribe opioid painkillers less often, in lower doses, and for shorter duration, following CDC/PDPH guidelines.
- Avoid, whenever possible, co-prescribing opioid pain relievers and benzodiazepines.
- Receive training to become certified by the DEA to prescribe buprenorphine.
- Help patients who are dependent on opioids receive medication-assisted treatment. This can be through referral to substance use treatment providers or by prescribing buprenorphine.

People can:

- Avoid taking opioids not prescribed for you, and question medical providers who prescribe opioids for pain about alternative, safer forms of pain control.
- Avoid using illicit drugs such as heroin and fentanyl, which are extremely dangerous.
- Seek medication-assisted treatment if you are dependent on opioids.
- Recommend that acquaintances who are using opioids seek treatment, and help them find providers.
- Obtain and get trained on how to use naloxone to prevent overdose fatalities. Naloxone is available at pharmacies in Pennsylvania without a prescription under a “standing order” signed by the Physician General.

Resources

- Harm reduction resources and education, including syringe exchange, smoking kit distribution, and infectious disease screening at [Prevention Point](#); 215-634-5272.
- [Drug treatment referrals and education](#) from Community Behavioral Health (Medicaid-enrolled); 1-888-545-2600; Behavioral Health Services Initiative (uninsured); 215-546-1200.
- [Naloxone resources and training dates](#).



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