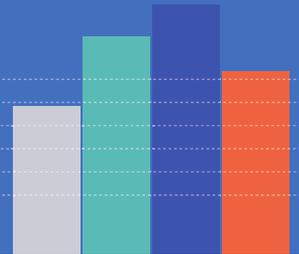




Thomas Farley, MD, MPH  
Commissioner

# CHART



## Unintentional Drug Overdose Fatalities in Philadelphia, 2019

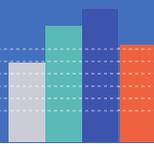
### KEY TAKEAWAYS

In Philadelphia, PA, unintentional drug overdoses contribute to significant premature mortality, with 1,217 deaths in 2017 and 1,116 deaths in 2018. Most overdose deaths in Philadelphia involve opioids, a class of drugs that includes heroin and pharmaceutical painkillers like oxycodone. Over the past decade, fentanyl, an extremely strong synthetic opioid, has emerged as the main driver of increasing overdose fatalities. While fentanyl was involved in less than 10% of drug overdose deaths in Philadelphia in 2010, it was involved in 76% of deaths in 2018. This issue of CHART summarizes trends in unintentional drug overdose fatalities through 2019. All data shown are from the Philadelphia Medical Examiner's Office.

In 2019, there were 1,150 drug overdose deaths in Philadelphia.

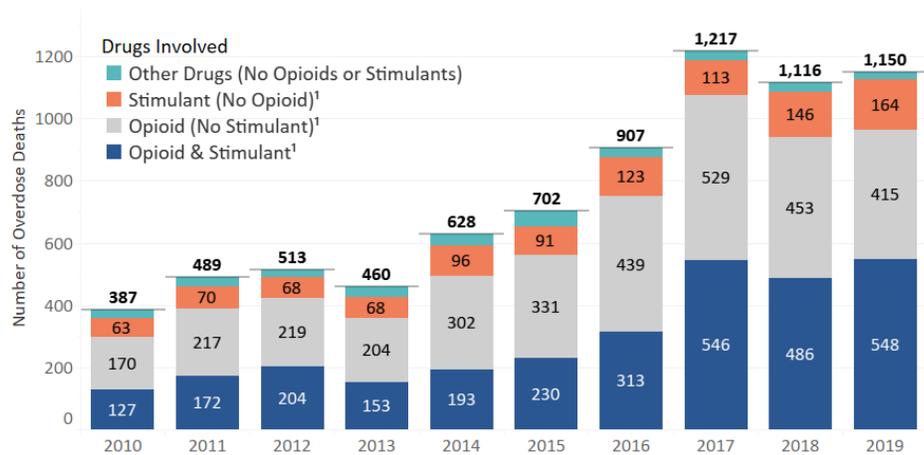
Deaths among black, non-Hispanic and Hispanic individuals increased while deaths among white, non-Hispanic individuals declined

Cocaine and fentanyl are most commonly involved in overdose deaths



## Unintentional Drug Overdose Deaths Increased by 3% From 2018 to 2019

### Number of Unintentional Overdose Deaths by Drugs Involved, 2010-2019

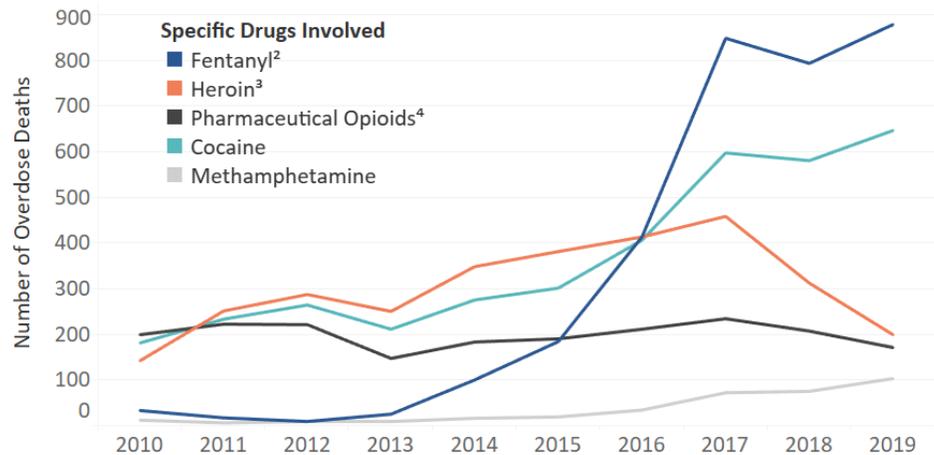


<sup>1</sup>Additional drugs such as sedating drugs may have been involved; Stimulants include cocaine, methamphetamine and pharmaceutical amphetamines.

- In 2019, 1,150 people died of an unintentional drug overdose. This represents a 3% increase from 2018.
- Opioids were detected in 84% of deaths in 2019. Stimulants such as cocaine and methamphetamine were detected in 50% of overdose deaths. Both stimulants and opioids were involved in 48% of overdose deaths.
- Deaths involving stimulants, with or without the presence of opioids, increased by 13% from 2018 to 2019. Deaths involving opioids and no stimulants decreased by 8% over the same time period.

## Most 2019 Overdose Deaths Involved Cocaine and/or Fentanyl

### Number of Overdose Deaths by Specific Drugs Involved, 2010-2019<sup>1</sup>



<sup>1</sup>Specific drugs involved are not mutually exclusive

<sup>2</sup>Includes both illicit and pharmaceutical fentanyl

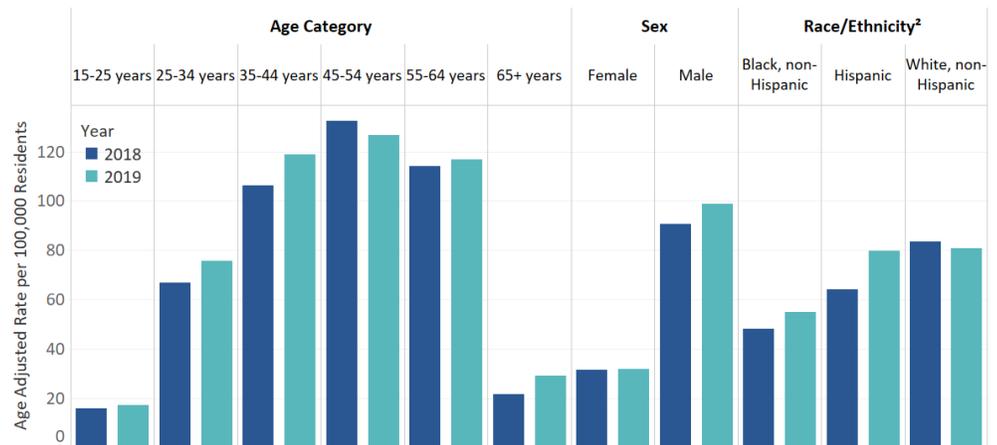
<sup>3</sup>May include morphine only deaths

<sup>4</sup>Includes methadone

- The number of deaths involving fentanyl, cocaine, or methamphetamine increased between 2018 and 2019 while the number of deaths involving heroin and pharmaceutical opioids decreased.

## Overdose Death Rates Increased in Particular Demographic Groups

Overdose Death Rates by Age, Sex, and Race/Ethnicity, 2018-2019<sup>1</sup>



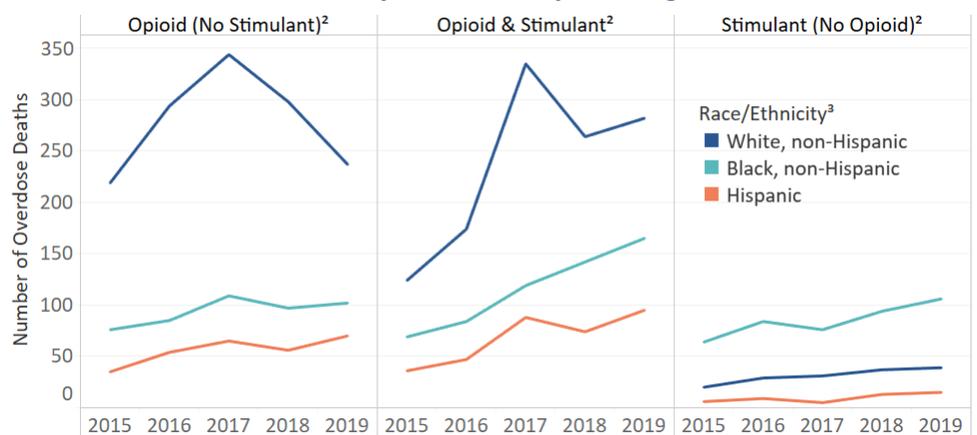
- From 2018 to 2019, rates of overdose increased among all age categories except those between the ages of 45-54 years.
- While the rate of overdose deaths decreased by 3% among white, non-Hispanic individuals from 2018 to 2019, the rate increased among black non-Hispanic and Hispanic individuals by 14% and 24%, respectively.
- Rates of overdose death increased among males and were similar for females between 2018 and 2019.

<sup>1</sup>Rates are age-adjusted to the U.S. 2000 Standard Population except those for specific age groups.

<sup>2</sup>Individuals of other race/ethnicity are excluded due to low counts

## Racial and Ethnic Disparities Exist in Drug Deaths by Drugs Involved

Number of Overdose Deaths by Race/Ethnicity and Drugs Involved, 2015-2019<sup>1</sup>



- For both black, non-Hispanic and Hispanic individuals, the number of drug deaths has increased from 2018 to 2019 across all major drug grouping categories.
- Deaths involving stimulants alone occur predominately among black, non-Hispanic individuals.
- Since 2017, the number of overdose deaths involving opioids without a stimulant has sharply declined among white, non-Hispanic individuals.

<sup>1</sup>Drug Categories are mutually exclusive; excludes Other Drugs (No Opioid or Stimulant) because of low counts

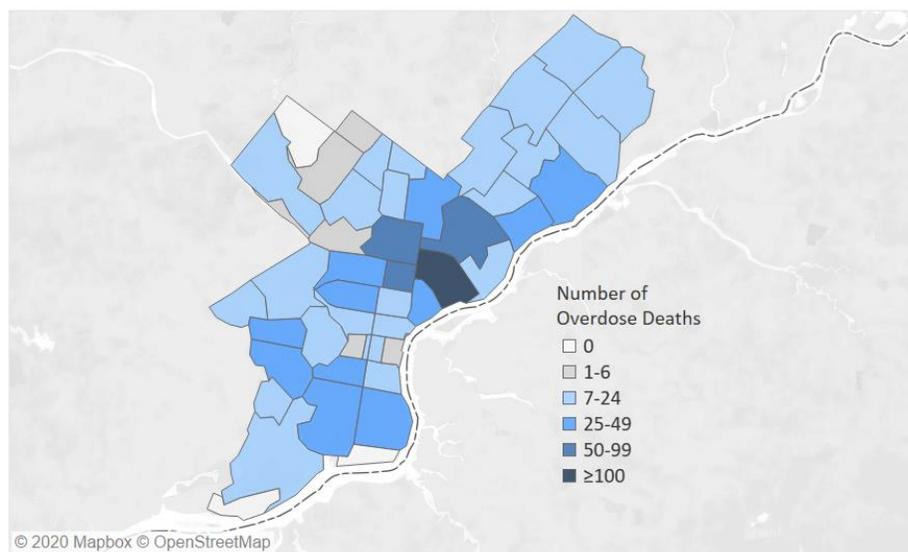
<sup>2</sup>Additional drugs such as sedating drugs may have been involved

<sup>3</sup>Individuals of other race/ethnicity are excluded due to low counts

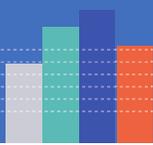


## Overdose Deaths Occur Throughout the City

Number of Overdose Deaths by Incident Location, 2019



- In 2019, the highest number of overdose deaths occurred in the 19134 ZIP code with 179 deaths. Deaths in this ZIP code increased by 14% between 2018 and 2019 (data not shown).
- The 19124, 19133, and 19140 ZIP codes had the next highest number of overdose deaths.



## WHAT CAN BE DONE

### The Health Department is:

- Coordinating with health systems and health care providers to reduce over-prescribing of pharmaceutical opioids.
- Supporting 'warm handoffs' to drug treatment from hospitals, jails, and the community. This includes the Philadelphia Fire Department-EMS Alternate Response Unit -2 (AR-2), an initiative developed to link people to treatment who refuse transport to a hospital after a non-fatal overdose.
- Increasing harm reduction approaches by:
  - distributing naloxone, the opioid overdose reversal drug, to organizations serving at risk populations,
  - training the public on opioid overdose recognition and naloxone use,
  - creating educational materials and developing a media campaign about risks associated with stimulant use, and
  - developing an overdose awareness campaign that considers the diversity of people who use drugs and Philadelphia's rapidly changing drug market.
- Increasing the availability of medication-assisted treatment through primary care practices, specialized substance use treatment providers, and the Philadelphia jails. *Medication-assisted treatment has been shown to reduce mortality among people with opioid use disorder and at greatest risk of a drug overdose.*
- Providing health care providers with training, mentorship, and technical support to treat patients with opioid use disorder in primary care.
- Raising awareness and promoting guidelines about safer substance use during the COVID-19 pandemic.

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### Health care providers should:

- Prescribe opioid painkillers less often, in lower doses, and shorter duration, following [PDPH guidelines](#).
- Co-prescribe naloxone with opioid prescriptions.
- Receive training to prescribe buprenorphine to opioid dependent patients.
- Help patients who are dependent on opioids access medication-assisted treatment. This can be done through referral to a substance use treatment provider or through prescribing buprenorphine.
- Educate people who use drugs to test their drugs for the presence of fentanyl using fentanyl test strips.
- Provide sterile syringes to their patients to reduce the spread of HIV and hepatitis C.

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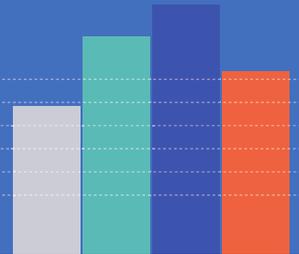
### People can:

- Avoid taking opioids that are not prescribed for them, and question medical providers who prescribe opioids for pain about alternative, safer forms of pain control.
- Avoid using illicit drugs such as heroin, fentanyl and cocaine, which are extremely dangerous.
- Seek medication-assisted treatment if dependent on opioids.
- Check their drugs for the presence of fentanyl using fentanyl test strips. Cocaine and pills purchased on the street may contain fentanyl.
- Obtain and get trained on how to use naloxone to prevent opioid overdose fatalities. Naloxone is available at pharmacies in Pennsylvania without a prescription under a "standing order" signed by the Pennsylvania Physician General.



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## RESOURCES:

**For resources for safer substance use during COVID-19:**

<https://www.phila.gov/2020-04-16-resources-for-safer-substance-use-during-covid-19/>

**For help on how to obtain and use naloxone:**

[phillynaloxone.com](http://phillynaloxone.com)

**For more information on Philadelphia's response to the opioid crisis:**

<https://www.phila.gov/programs/combating-the-opioid-epidemic/>

**For information on how to access treatment:**

<https://dbhids.org/addiction-services/>

**For harm reduction resources including syringe exchange:**

<https://ppponline.org/>

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