



# New Hampshire Drug Monitoring Initiative

New Hampshire Information & Analysis Center

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NHIAC Product #: 2019-3637

January 2019 Report

4 March 2019

**Purpose:** The NH Drug Monitoring Initiative (DMI) is a holistic strategy to provide awareness and combat drug distribution and abuse. In line with this approach the DMI will obtain data from various sources (to include, but not limited to, Public Health, Law Enforcement, and EMS) and provide monthly products for stakeholders as well as situational awareness releases as needed.

## Drug Environment Report—UNCLASSIFIED

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Previous versions of the Drug Environment Report can be found at: <https://www.dhhs.nh.gov/dcbcs/bdas/data.htm>

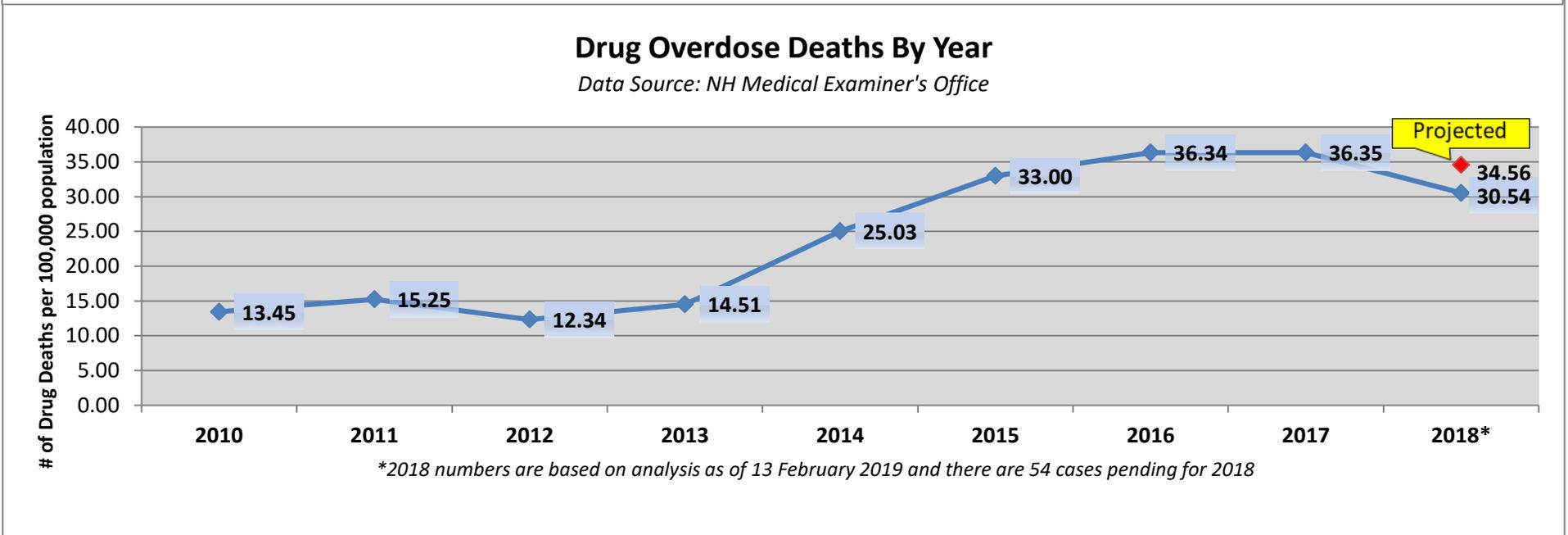
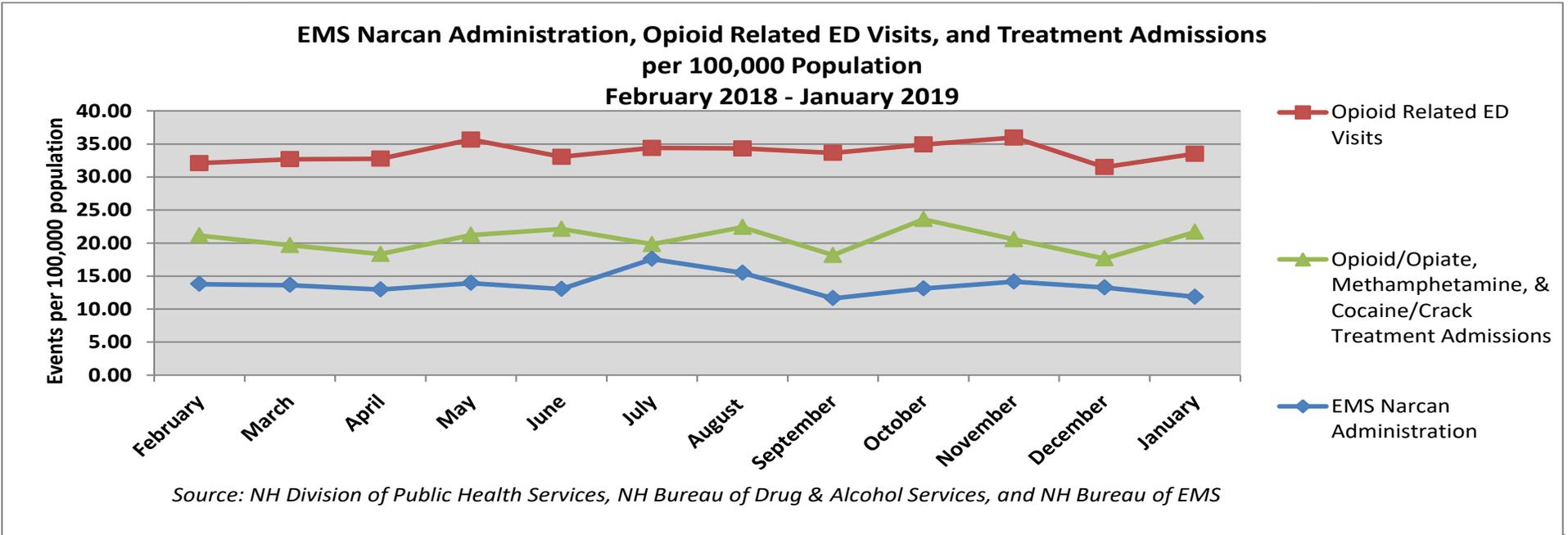
The monthly online DMI viewer can be found at: <https://nhvieww.nh.gov/IAC/DMI/>

⇒ Population data source: <http://www.nh.gov/osi/data-center/population-estimates.htm>

- Year/month overview charts are based on annual estimates from the above website. County charts are based on a 2017 estimated population of each county.

⇒ If your agency is looking for further breakdowns than what is in this document please contact the NHIAC.

**Overview: Trends for Narcan, ED Visits, Treatment Admissions, and Overdose Deaths:**



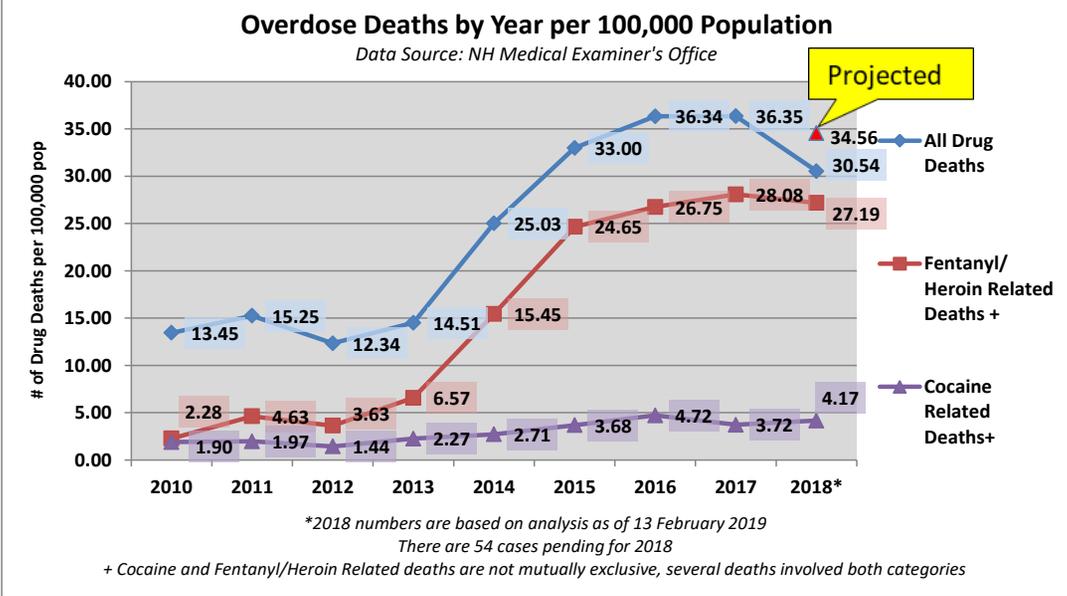
**Drug Overdose Deaths:**

Data Source: NH Medical Examiner's Office

Right click on the paperclip and select "Open File" to view additional data.

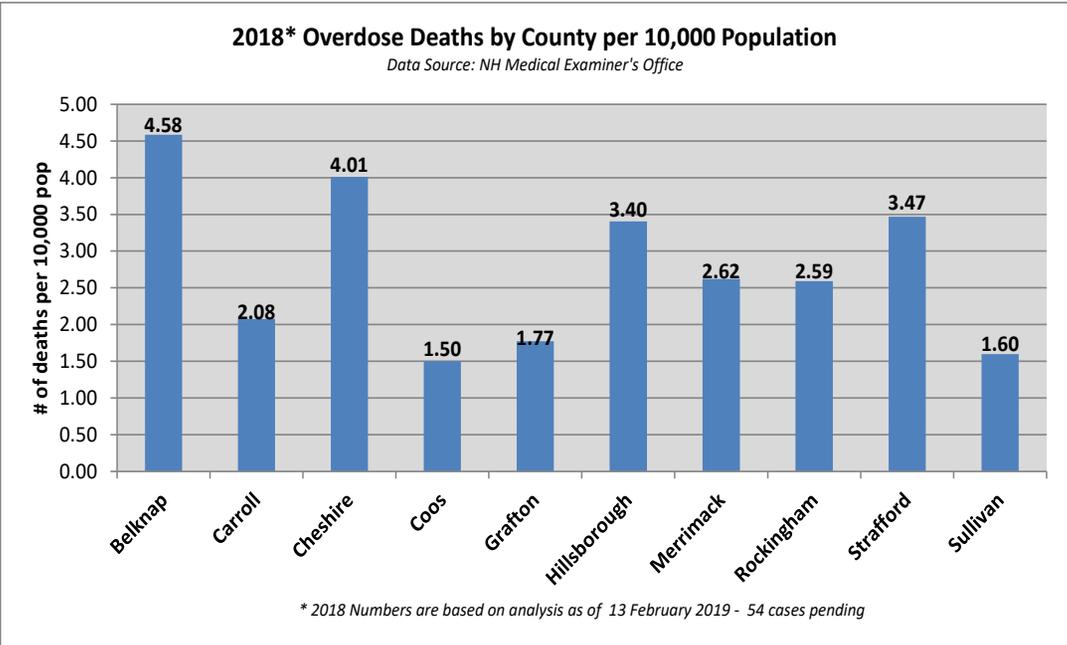
**Trends:**

- As of 13 February 2019, there are 410 total, confirmed drug overdose deaths and 54 cases pending toxicology for 2018.
- **The Office of the Chief Medical Examiner has increased its projection from 450 to 464 drug overdose deaths for 2018.**
- For 2018 thus far, Belknap County has the highest suspected drug use resulting in overdose deaths per capita at 4.58 deaths per 10,000 population, while Cheshire County has the second highest with 4.01 deaths per 10,000 population.
- The age group with the largest number of drug overdose deaths is 30-39 years, which represents 32% of all overdose deaths for 2018.



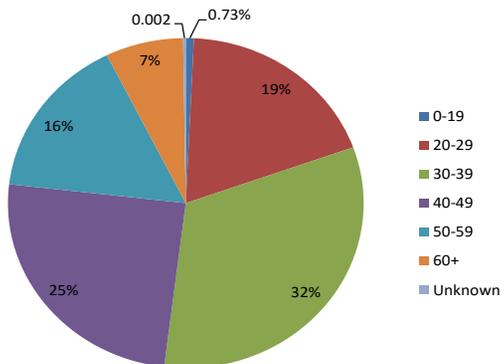
**\*\*\* IMPORTANT DATA NOTES \*\*\***

- 2018 Numbers are based on analysis as of 13 February 2019.
- Analysis is based on county where the drug (s) is suspected to have been used.



**Overdose Deaths by Age 2018\***

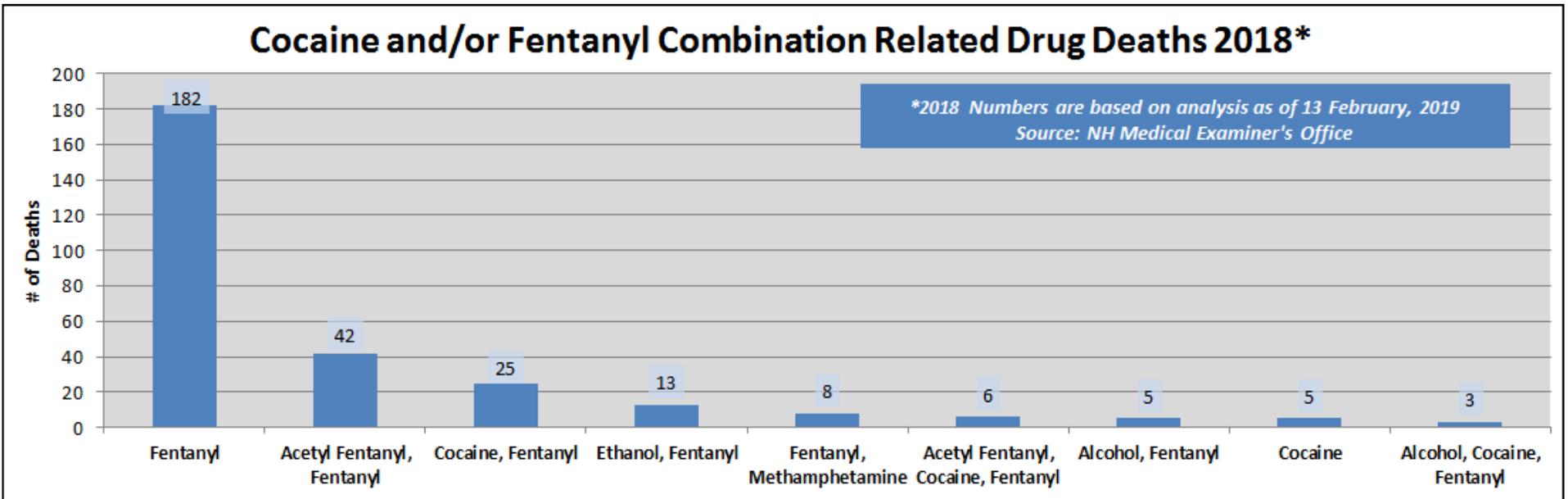
Data Source: NH Medical Examiner's Office



\*2018 Numbers are based on analysis as of 13 February 2019

**Drug Overdose Deaths (Continued):**

Data Source: NH Medical Examiner's Office



Cocaine and/or Fentanyl Combination Related Drug Deaths that were noted once or twice*						
Acetyl Fentanyl, Diazepam, Ethanol, Fentanyl	Acetyl Fentanyl, Ethanol, Fentanyl	Alcohol, Chlorpheniramine, Fentanyl	Alprazolam, Fentanyl, Hydrocodone	Buprenorphine, Diphenhydramine, Fentanyl	Cocaine, Diphenhydramine, Ethanol	Fentanyl, Ketamine
Alprazolam, Fentanyl	Acetyl Fentanyl, Ethanol, Fentanyl, Ketamine, MDMA	Alcohol, Fentanyl, Heroin, Oxycodone, Sertraline	Amitriptyline, Clonazepam, Diazepam, Fentanyl	Bupropion, Diazepam, Ethanol, Fentanyl	Cocaine, Duloxetine, Fentanyl	Fentanyl, MDMA, Methamphetamine
Cocaine, Ethanol, Fentanyl	Acetyl Fentanyl, Ethanol, Fentanyl, Oxycodone	Alcohol, Fentanyl, Quetiapine, Sertraline	Amitriptyline, Cocaine, Diphenhydramine	Bupropion, Fentanyl, Olanzapine	Cocaine, Fentanyl, Methamphetamine	Fentanyl, Methamphetamine, Methylendioxyamphetamine
Cocaine, Fentanyl, Hydroxyzine	Acetyl Fentanyl, Fentanyl, Heroin	Alprazolam, Amphetamines, Clonazepam, Cocaine, Ethanol, Fentanyl	Amphetamines, Buprenorphine, Fentanyl, Hydroxyzine, Methamphetamine, Trazodone	Clonazepam, Cocaine, Fentanyl, Phenobarbital	Cocaine, Morphine	Fentanyl, Mitragnine
Fentanyl, Methadone	Acetyl Fentanyl, Fentanyl, Methadone	Alprazolam, Amphetamines, Cocaine, Fentanyl, Morphine	Amphetamines, Fentanyl	Clonazepam, Fentanyl	Diazepam, Ethanol, Fentanyl	Fentanyl, Morphine
4-ANPP, Acetyl Fentanyl, Fentanyl, Parafluoroisobutyrylfentanyl	Acetyl Fentanyl, Fentanyl, Methamphetamine	Alprazolam, Buprenorphine, Fentanyl, Lorazepam, Oxycodone	Amphetamines, Fentanyl, Hydromorphone	Cocaine, Cyclobenzaprine, Fentanyl	Diazepam, Fentanyl, Methamphetamine	Fentanyl, Oxycodone
4-ANPP, Fentanyl, Valeryl Fentanyl	Acetyl Fentanyl, Fentanyl, Mitragnine	Alprazolam, Cocaine, Fentanyl	Aripirazole, Fentanyl, Quetiapine	Cocaine, Diazepam, Fentanyl	Duloxetine, Ethanol, Fentanyl, Hydromorphone	
Acetyl Fentanyl, Amphetamines, Clonazepam, Fentanyl	Alcohol, Amphetamines, Fentanyl	Alprazolam, Fentanyl, Heroin	Buprenorphine, Cocaine	Cocaine, Diazepam, Oxazepam	Duloxetine, Fentanyl, Valeryl Fentanyl	

\*Cells filled with gray indicate combinations noted twice

# Overdose Deaths by Town\* - 2018 + (Data Source: NH Medical Examiner's Office)

\*Location where the drug(s) is suspected to have been used.

+2018 data was reported on February 13, 2019  
There are many more deaths that are suspected to be drug related, but the official cause of death is pending until the toxicology results are received.  
54 cases are pending.



Prepared by:  
NH Information & Analysis Center



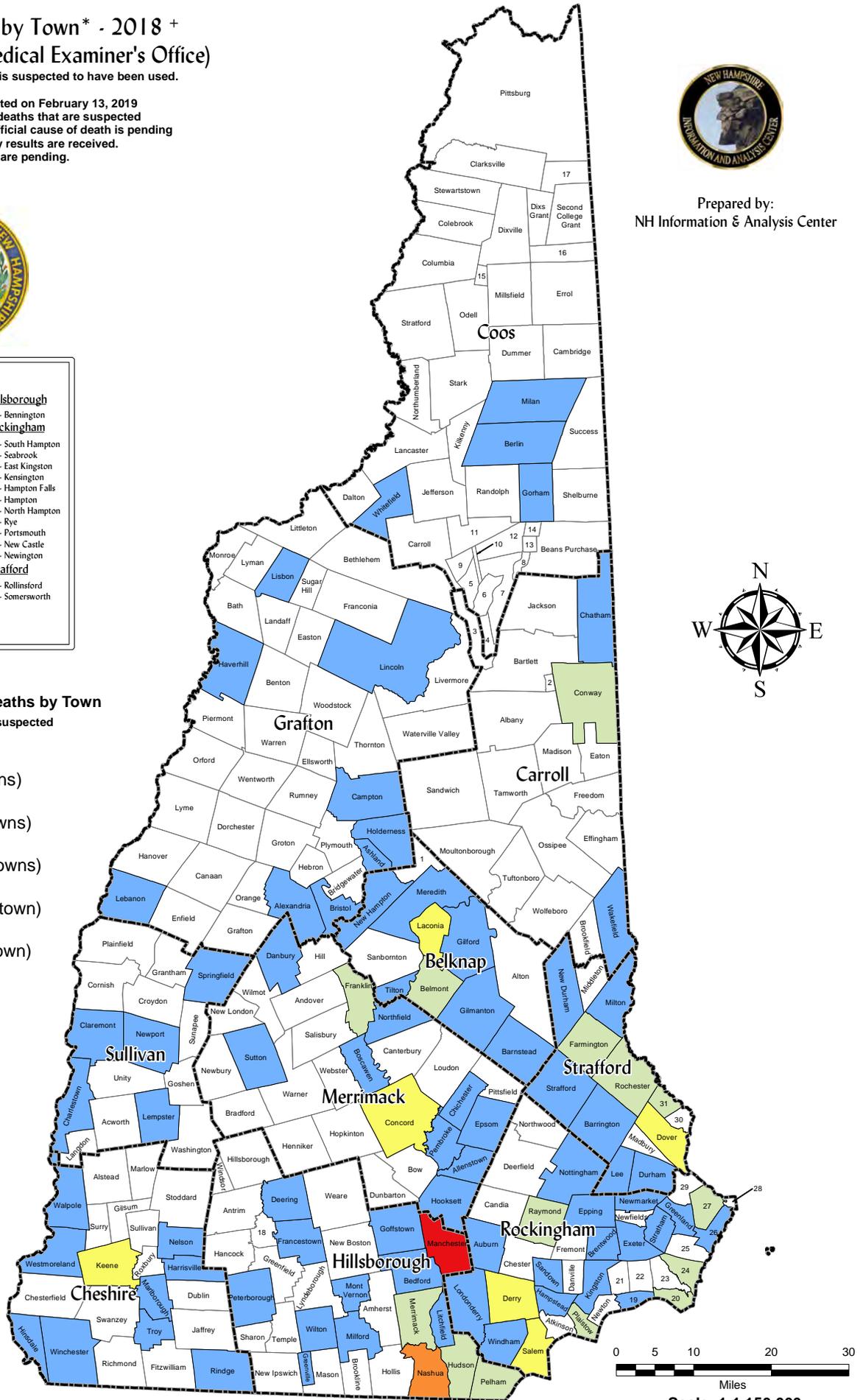
**INDEX**

<b>Belknap</b>	<b>Hillsborough</b>
1 - Center Harbor	18 - Bennington
<b>Carroll</b>	<b>Rockingham</b>
2 - Hales Location	19 - South Hampton
3 - Harts Location	20 - Seabrook
<b>Coos</b>	21 - East Kingston
4 - Hadleys Purchase	22 - Kensington
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**Number of Overdose Deaths by Town**

\*Location where the drug(s) is suspected to have been used.

- 1 - 4 (75 towns)
- 5 - 10 (14 towns)
- 11 - 25 (6 towns)
- 26 - 50 (1 town)
- 51 - 100 (1 town)



**EMS Narcan Administration:**

Data Source: NH Bureau of Emergency Medical Services (EMS)

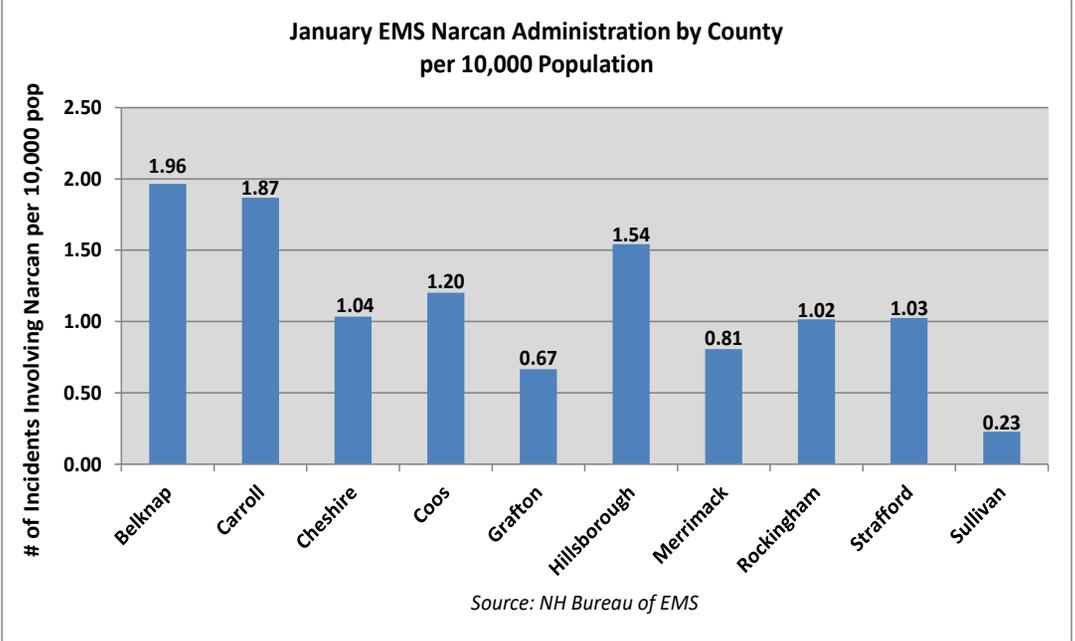
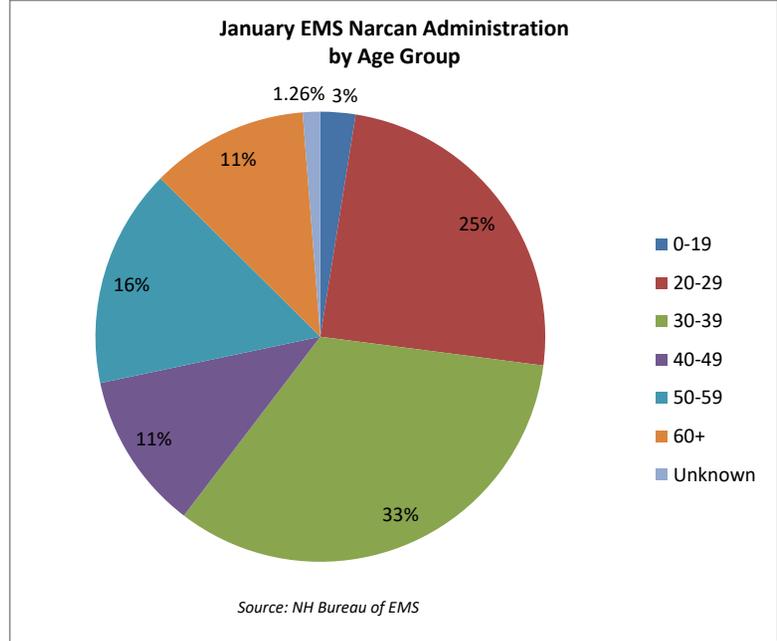
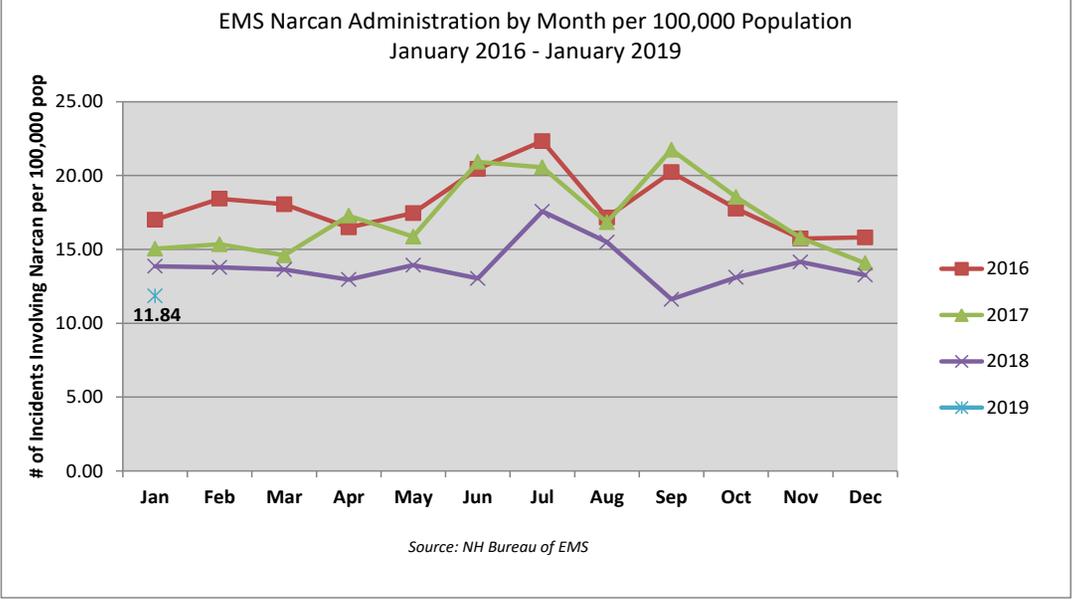
Right click on the paperclip and select "Open File" to view additional data.

**Trends:**

- EMS Narcan administration incidents decreased by 11% from December to January.
- In January, Belknap County had the most EMS Narcan administration incidents per capita with 1.96 incidents per 10,000 population, followed closely by Carroll County with 1.87 incidents per 10,000 population.
- The age group with the largest number of EMS Narcan administration incidents was 30-39, which represents 33% of all EMS Narcan administration incidents for January.

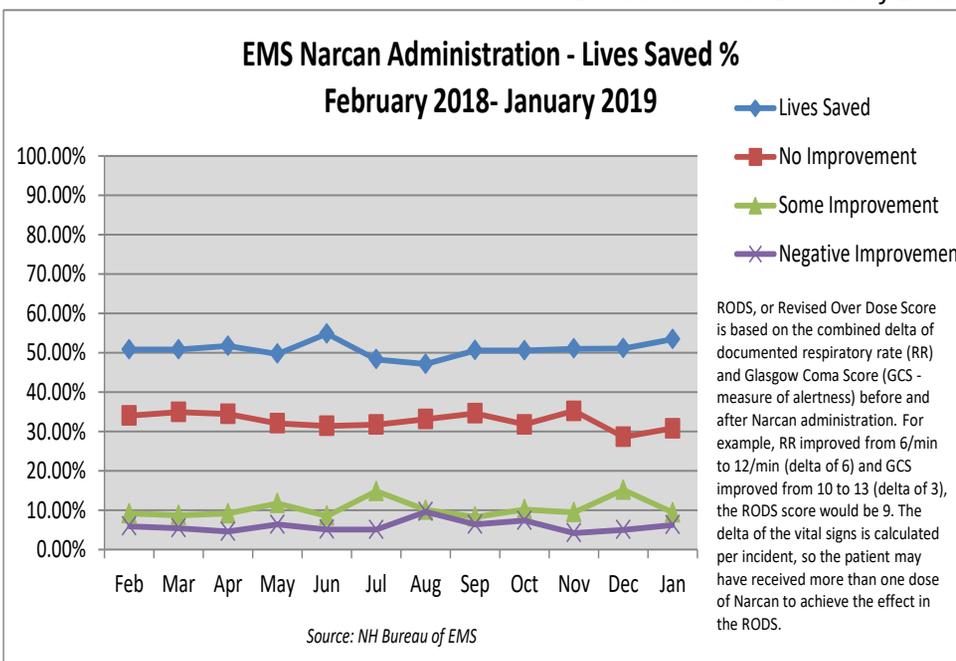
**\*\*\* IMPORTANT DATA NOTES \*\*\***

- Narcan data in this report involves the number of incidents where Narcan was administered, NOT the number of doses of Narcan during a certain time period. Multiple doses may be administered during an incident.
- Narcan may be given for a decrease in alertness or respirations due to an overdose or unknown cause. *Therefore, it cannot be concluded that all reported Narcan incidents actually involved drugs.*



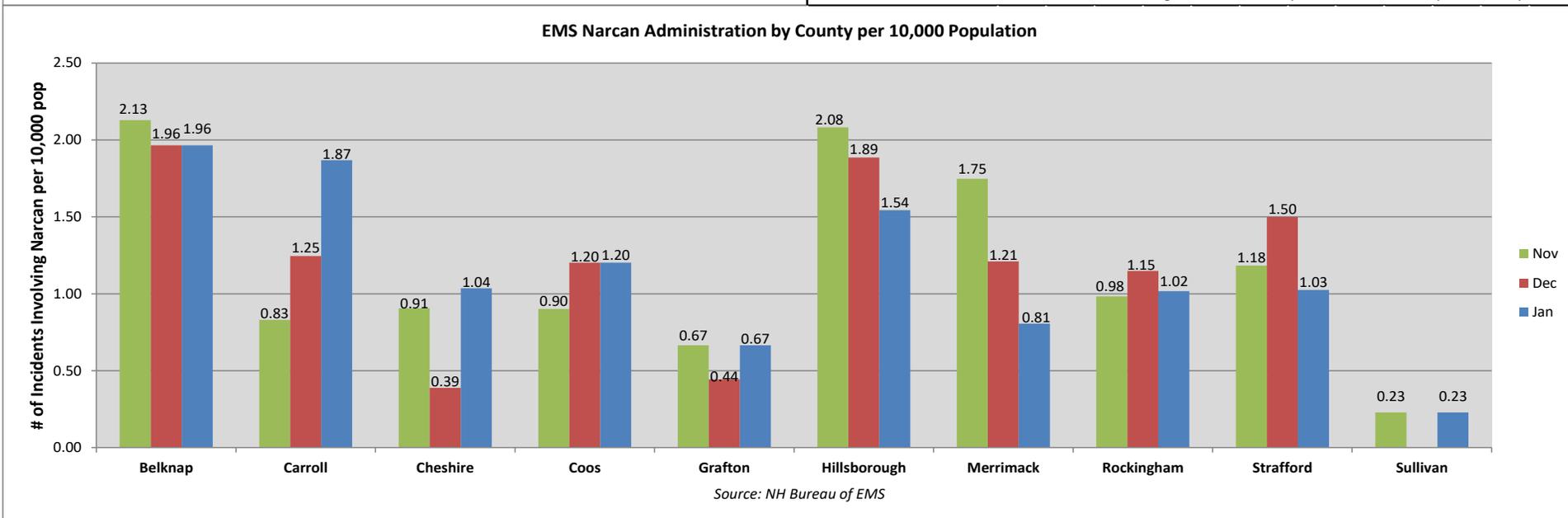
### EMS Narcan Administration (Continued):

Data Source: NH Bureau of Emergency Medical Services (EMS)



EMS Narcan Administration - Lives Saved												
	2018											2019
<i>Source: NH Bureau of EMS</i>	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan
RODS Outcome												
<b>Lives Saved</b> <i>RODS Score of 8+</i>	94	93	90	93	96	114	98	79	89	97	91	85
<b>Some Improvement</b> <i>RODS Score of 1-7</i>	17	16	16	22	15	35	21	13	18	18	27	15
<b>No Improvement</b> <i>RODS Score of 0</i>	63	64	60	60	55	75	69	54	56	67	51	49
<b>Negative Improvement</b> <i>Negative RODS Score</i>	11	10	8	12	9	12	20	10	13	8	9	10
<b>Total</b>	<b>185</b>	<b>183</b>	<b>174</b>	<b>187</b>	<b>175</b>	<b>236</b>	<b>208</b>	<b>156</b>	<b>176</b>	<b>190</b>	<b>178</b>	<b>159</b>

RODS, or Revised Over Dose Score is based on the combined delta of documented respiratory rate (RR) and Glasgow Coma Score (GCS - measure of alertness) before and after Narcan administration. For example, RR improved from 6/min to 12/min (delta of 6) and GCS improved from 10-13 (delta of 3), the RODS score would be 9. The delta of the vital signs is calculated per incident, so the patient may have received more than one dose of Narcan to achieve the effect in the RODS.



EMS/Narcarn Administration by Town  
2/1/2018 - 1/31/2019

Data Source: New Hampshire Bureau of EMS

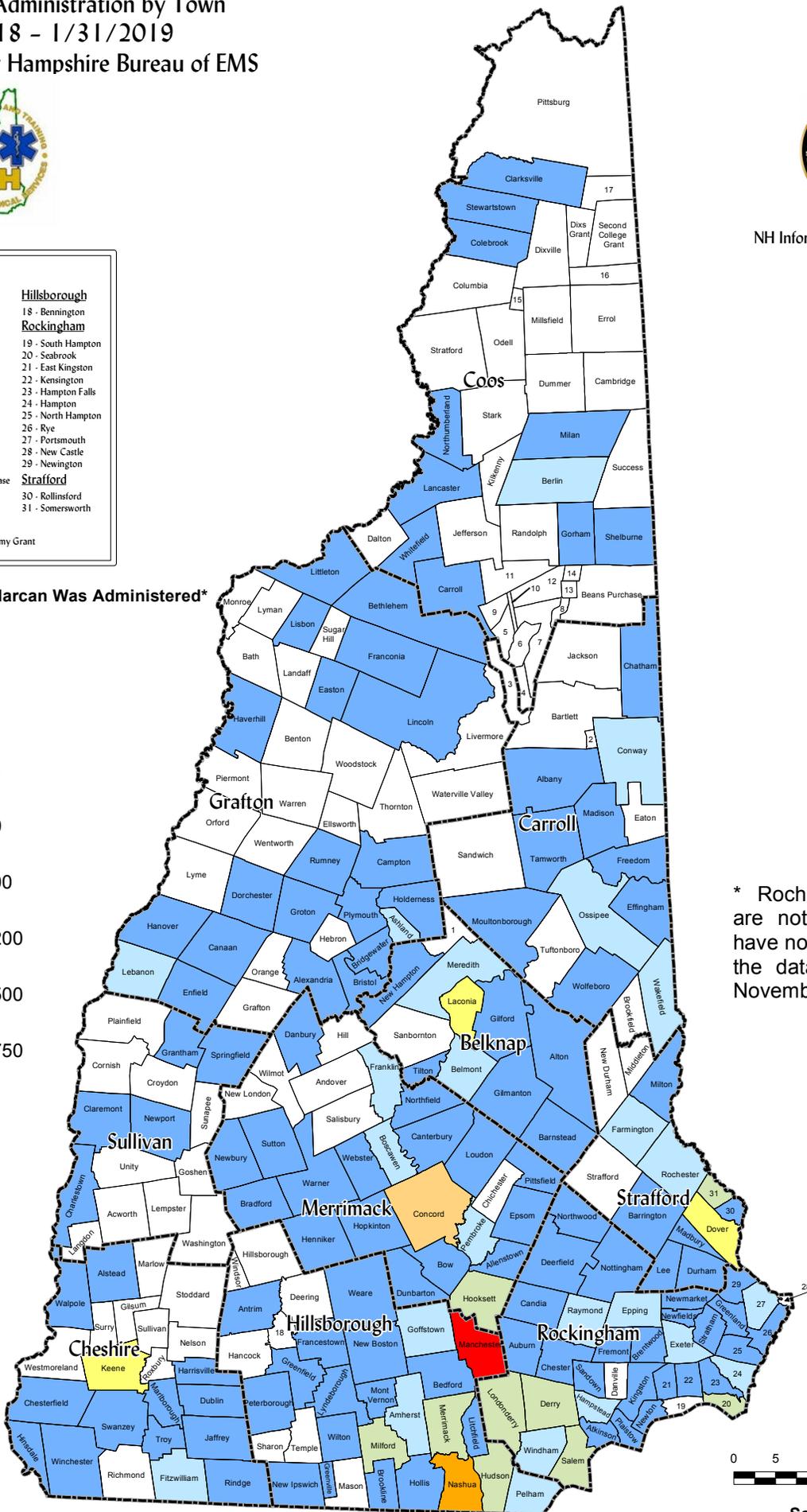
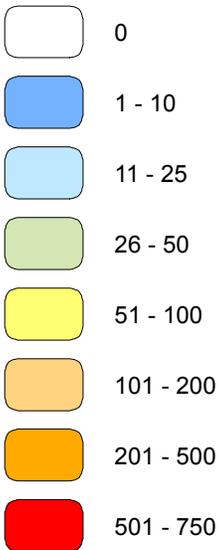


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\*Incidents Where Narcan Was Administered\*



\* Rochester totals for 2018 are not complete as runs have not been uploaded into the database since May - November.



**Opioid Related Emergency Department Visits:**

Data Source: NH Division of Public Health Services

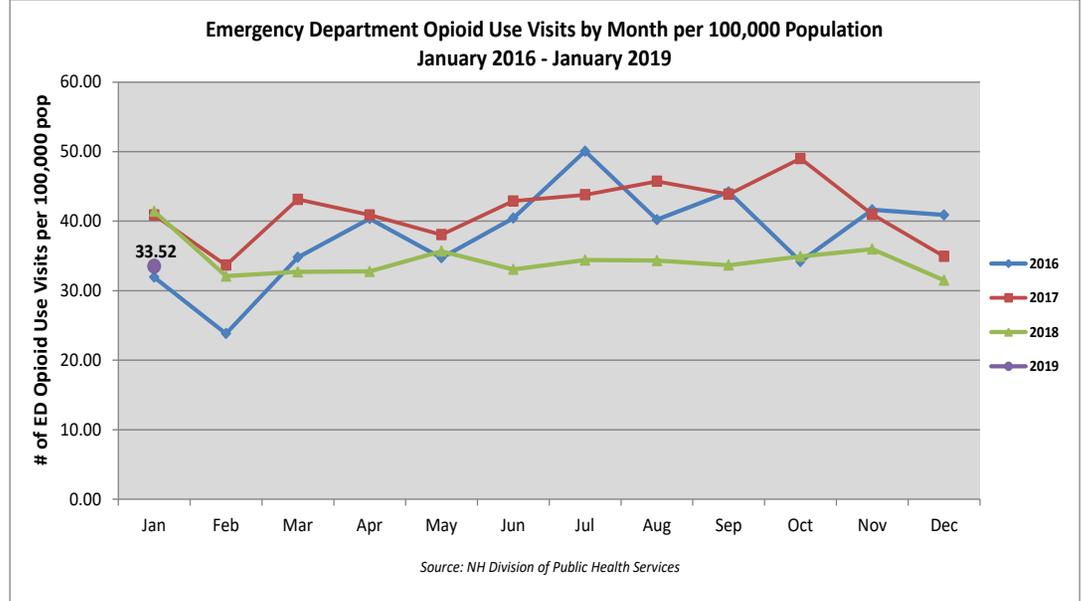
Right click on the paperclip and select "Open File" to view additional data.

**Trends:**

- Opioid related ED visits increased by 6% from December 2018 to January 2019.
- In January, residents from Strafford County had the most opioid related ED visits per capita with 5.84 visits per 10,000 population.
- Hillsborough and Belknap County residents nearly tied for the second highest number of opioid related ED visits per capita with 4.31 and 4.26 visits per 10,000 population, respectively.
- In January, the age group with the largest number of opioid related ED visits was 30-39 year olds, with 37%.

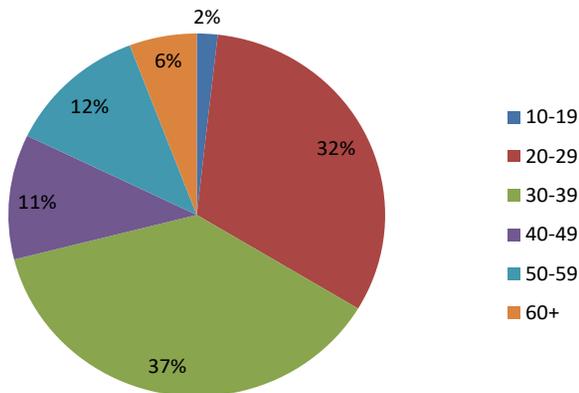
**\*\*\* IMPORTANT DATA NOTES \*\*\***

- County represents where the opioid use patient resides.
- These data represent any encounter with the term "heroin, opioid, opiate, or fentanyl" listed as chief complaint text. These data also represent any encounter with an ICD-10 code that was designated for heroin and opioids.
- Currently all but two of the hospitals are sending ICD-10 data.
- These data include other opioid-related encounters such as poisonings, withdrawals, and detox.



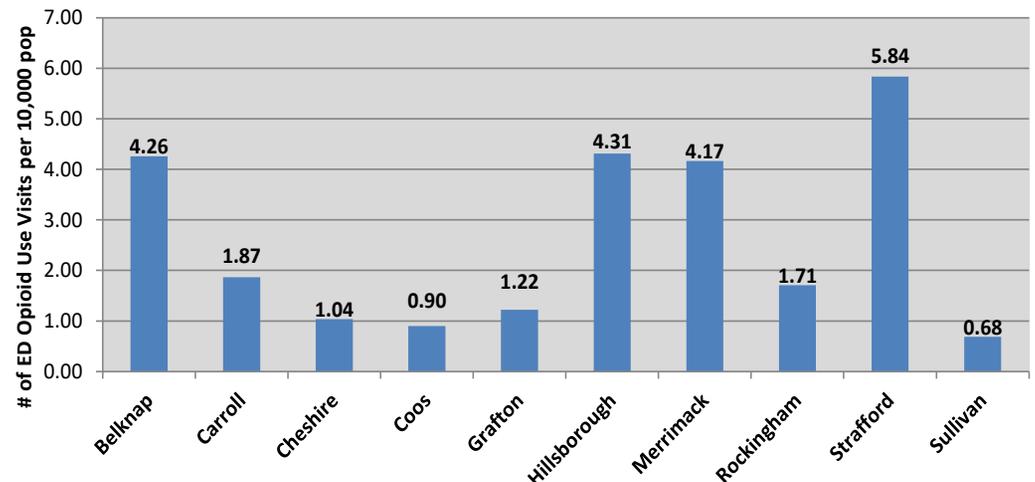
Source: NH Division of Public Health Services

**January Emergency Department Opioid Use Visits by Age**



Source: NH Division of Public Health Services

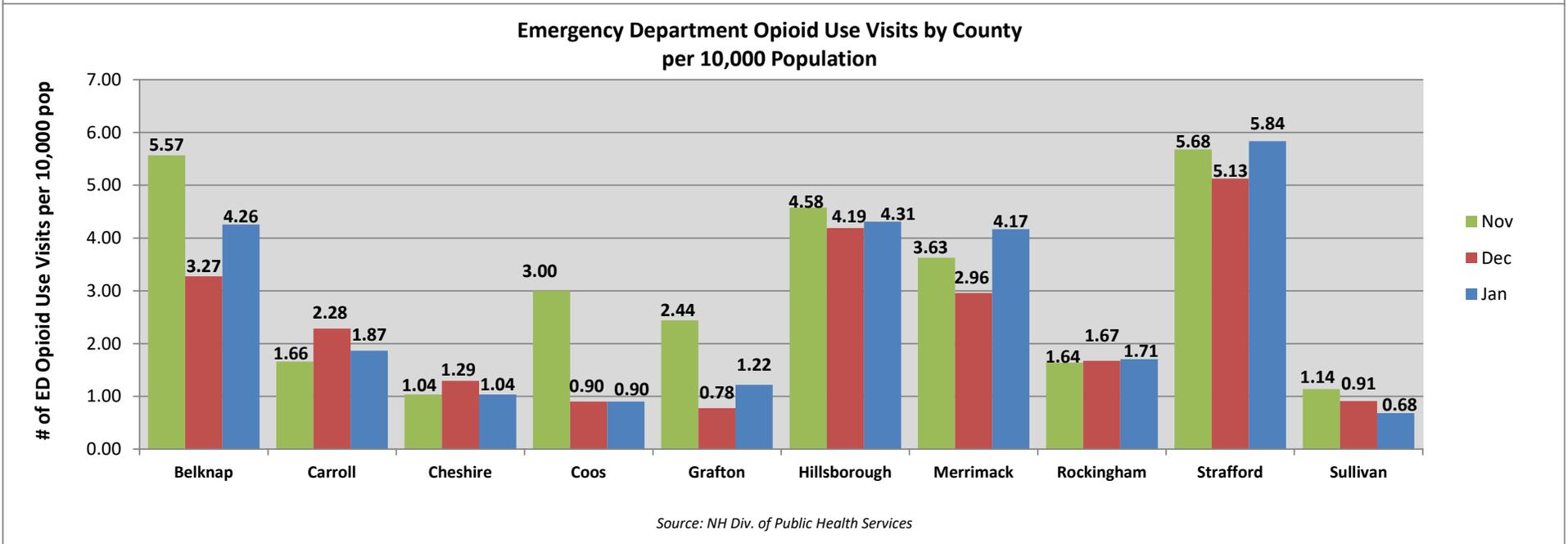
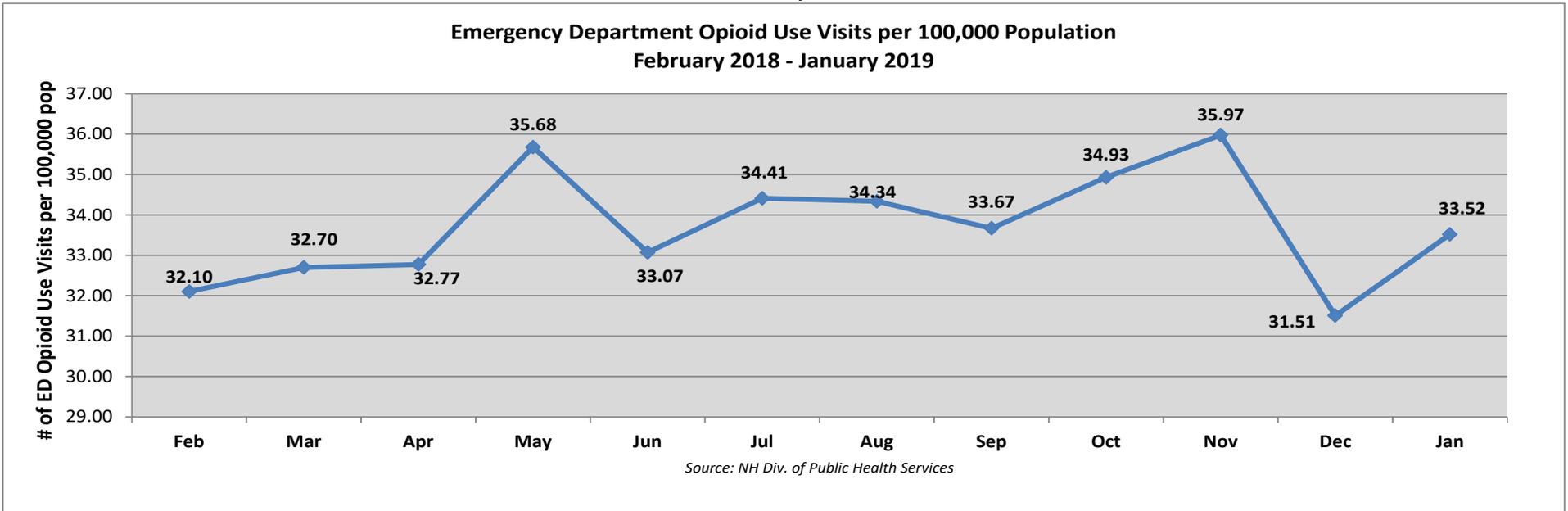
**January Emergency Department Opioid Use Visits by County per 10,000 Population**



Source: NH Division of Public Health Services

**Opioid Related Emergency Department Visits (Continued):**

Data Source: NH Division of Public Health Services



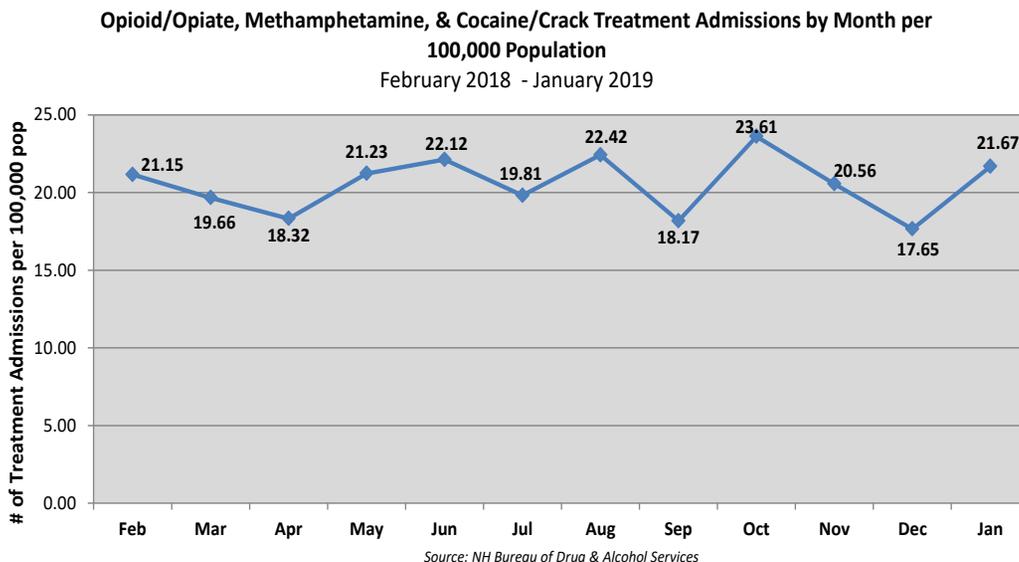
### Treatment Admissions:

Data Source: NH Bureau of Drug & Alcohol Services

Right click on the paperclip and select "Open File" to view additional data.

#### Trends:

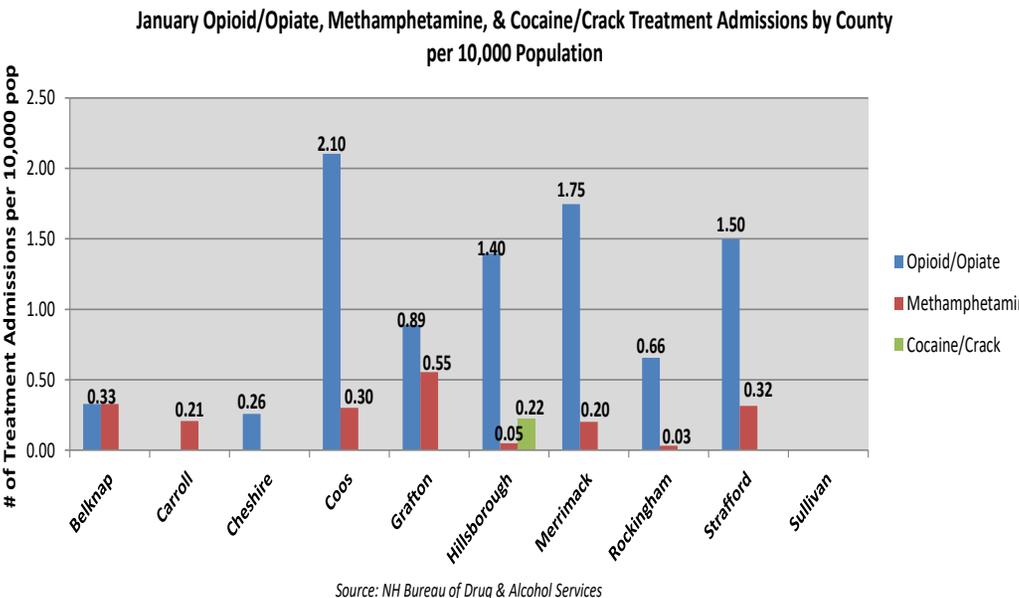
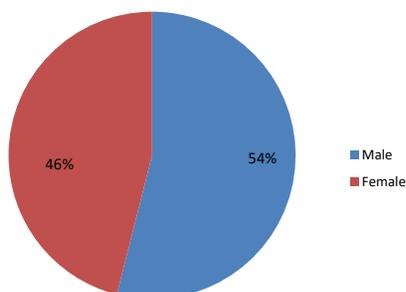
- Opioid/opiate, Methamphetamine, & Cocaine/Crack treatment admissions increased by 23% from December to January.
- In January, residents from Coos County were admitted most often for opioid/opiate treatment per capita with 2.10, followed by Merrimack County with 1.75 admissions per 10,000 population.
- More males than females were admitted to treatment programs in January for Opioid/Opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions increased by 83% from December to January.
- Cocaine/Crack treatment admissions remained the same December to January.
- Heroin/Fentanyl treatment admissions increased by 19% from December to January.



#### \*\*\* IMPORTANT DATA NOTES\*\*\*

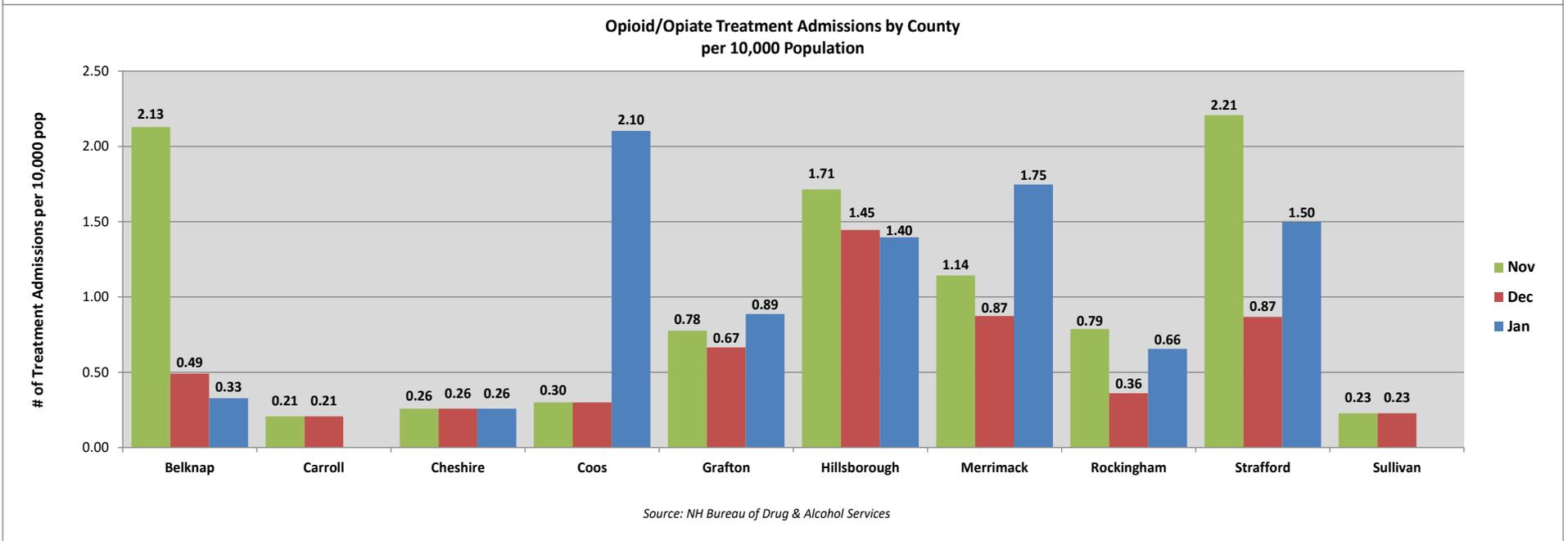
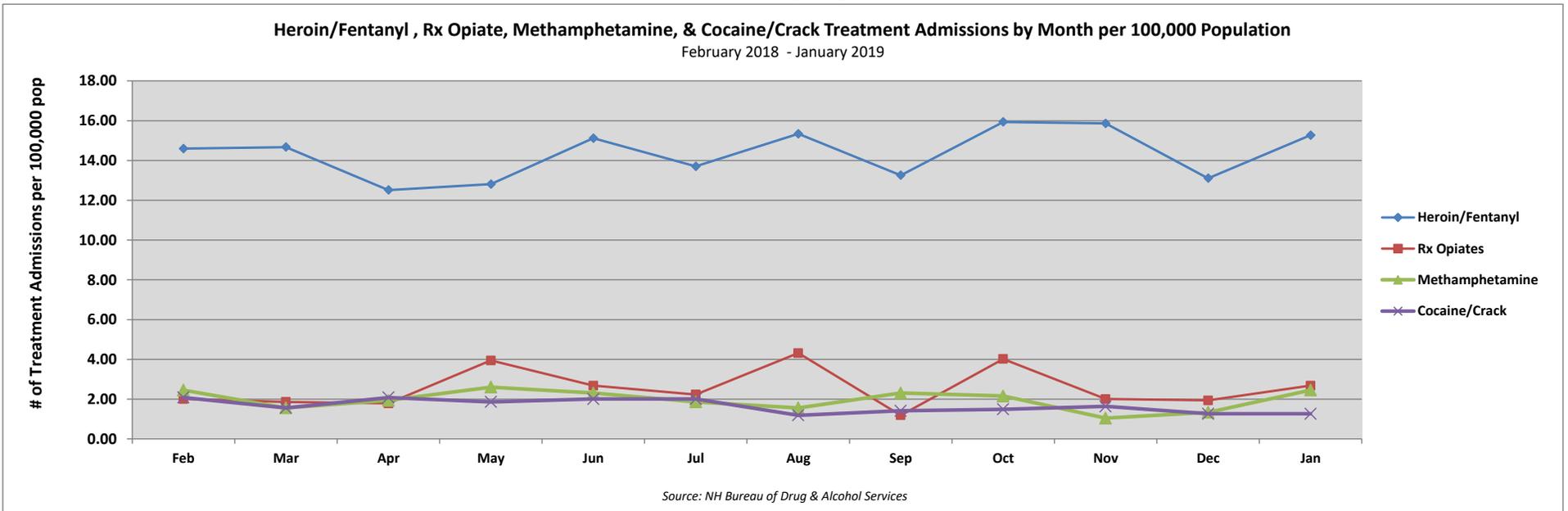
- County represents where the patient resides.
- These data represent treatment admissions to state funded facilities.
- These data have decreased due to numerous factors. The Affordable Care Act has been fully implemented, resulting in increased access to affordable health insurance and coverage for substance use disorder treatment in NH. New Hampshire expanded its Medicaid program, which also provided increased opportunities for substance use disorder treatment in the state. Substance use disorder treatment in the state has increased sharply in response to these policies which has shifted clients served by State of New Hampshire contracted treatment providers to other payment models and facilities.

January Treatment Admissions by Gender



**Treatment Admissions (Continued):**

Data Source: NH Bureau of Drug & Alcohol Services



**Situational Awareness:**



**NH Opioid Recovery Center Testifies on Importance of Federal Funding**

**WASHINGTON** — Federal grants are making a major impact in the state of addiction, according to the executive director of a lakes region recovery center who testified in Washington, D.C. Thursday.

Daisy Pierce, Ph.D, director of Navigating Recovery of the Lakes Region, told a Senate Appropriations subcommittee how millions of federal dollars are changing Granite Stater's lives. "We map out recovery, the whole life process, not just abstinence from alcohol and other drugs but everything that's involved in someone's life," said Pierce.

Sen. Jeanne Shaheen invited Pierce to tell the Senate subcommittee about New Hampshire's new "hub and spoke" treatment system, and how a network of caregivers can connect with a patient 24 hours a day. "We now have technical assistance that allows all community service providers to have a shared coordination care plan, which means that if someone we work with ends up in the emergency department, we're immediately notified," said Pierce.

Federal state opioid resource grants and expanded Medicaid mean more people have access to the ongoing recovery care they need, said Pierce.

Source: [www.wmur.com](http://www.wmur.com) 3/1/2019

# NEW HAMPSHIRE SAFE STATIONS

Manchester Safe Station Began 5/4/2016  
 Nashua Gateway to Recovery Began 11/17/2016

Manchester

Nashua

As of 2/22/2019

As of 2/22/2019

	Q1 2019	Total	Q1 2019	Total
Number of requests at MFD/NFR for Safe Station:	200	4,760	147	2,665
Number of participants transported to hospitals:	30	1,150	26	299
Number of participants taken to Substance Misuse Treatment Facilities:	163	3,867	121	2,383
Average length of time company "Not Available":	11.7 Min	15.1 Min	9.8 Min	10.2 Min
Number of UNIQUE participants:	178	2,900	126	1,515
Number of REPEAT participants:	103	2,029	86	1,454
Number of unique participants seen in both City's Safe Station Program	347			

**Dartmouth-Hitchcock Studies Lead To Decline In Opioid Prescriptions**

**LEBANON, N.H.** — Studies performed at Dartmouth-Hitchcock Medical Center have led to a drop in the number of opioids prescribed across the country, officials said. Dr. Richard Barth, chief of general surgery at Dartmouth-Hitchcock, has been leading research into opioid prescribing levels. His first study revealed that after the most common outpatient operations, nearly every patient was prescribed opioids, but they only used about one-fourth of the prescription.

The remaining drugs could be abused by people who weren't prescribed the medication, Barth said. When Dartmouth-Hitchcock researchers told other surgeons what they found, doctors cut their prescriptions in half. Barth said the number of opioids prescribed nationwide has dropped 9 percent. New Hampshire leads the country with the highest decrease, with prescriptions down 15 percent over last year.

Source: [www.wmur.com](http://www.wmur.com) 2/18/2019

**Substance Abuse Treatment/Recovery Directory:**

State funded treatment facilities in NH (NOT a complete list) - Data Source: NH Department of Health and Human Services

**BETHLEHAM**

**North Country Health Consortium  
(NCHC)/ Friendship House**  
262 Cottage Street. Suite 230  
Bethlehem, NH  
Phone: 603-259-3700

**DOVER**

**Southeastern NH Alcohol and  
Drug Abuse Services**  
272 County Farm Road  
Dover, NH  
Crisis Center: 603-516-8181  
Main: 603-516-8160

**DUBLIN**

**Phoenix House Comprehensive  
Addiction Treatment Services**  
3 Pierce Rd. Dublin, NH  
Phone: 603-563-8501, Option 1

**FRANKLIN**

**Farnum Center North  
Ray House (Women)**  
14 Holy Cross Road. Franklin, NH  
Phone: 603-263-6287

**KEENE**

**Phoenix House Comprehensive  
Addiction Treatment Services**  
106 Roxbury Street. Keene, NH  
Phone: 603-358-4041, Option 1

**LEBANON**

**Headrest**  
14 Church Street  
Lebanon, NH  
Phone: 603-448-4400

**Alice Peck Day Hospital**  
10 Alice Peck Day Drive  
Lebanon, NH  
Phone: 603-448-4400

**West Central Services, Inc.**  
9 Hanover Street, Suite 2  
Lebanon, NH  
Phone: 603-448-0126

**MANCHESTER**

**Dismas Home of NH, Inc. (Women)**  
102 Fourth Street  
Manchester, NH  
Phone: 603-782-3004

**Families in Transition - New**

**Horizons**  
293 Wilson Street  
Manchester, NH  
Phone: 603-641-9441 ext. 401

**Farnum Center**

140 Queen City Avenue  
Manchester, NH  
Phone: 603-622-3020

**NASHUA**

**Greater Nashua Council on  
Alcoholism**  
12 & 1/2 Amherst Street  
Nashua, NH  
Phone: 603-943-7971 Ext. 3

**Greater Nashua Council on  
Alcoholism: Keystone Hall**  
615 Amherst Street  
Nashua, NH  
Phone: 603-881-4848

**Greater Nashua Mental Health  
Center**

110 West Pearl Street  
Nashua, NH  
Phone: 603-889-6147

**ROCHESTER**

**Hope on Haven Hill**  
PO Box 1271  
Rochester, NH 03867  
Phone: 603-247-2043

**A full list of Substance Abuse and  
Treatment Facilities can be found  
[here](#).**

**A treatment locator can be found  
[here](#).**