Purpose: The NH Drug Monitoring Initiative (DMI) is a holistic strategy to provide awareness and combat drug distribution and misuse. 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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<th>Section Title</th>
<th>Page #</th>
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Previous versions of the Drug Environment Report can be found at: [https://www.dhhs.nh.gov/dcbcs/bdas/data.htm](https://www.dhhs.nh.gov/dcbcs/bdas/data.htm)

The monthly online DMI viewer can be found at: [https://nhvieww.nh.gov/IAC/DMI/](https://nhvieww.nh.gov/IAC/DMI/)


- 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:

**EMS Narcan Administration, Opioid Related ED Visits, and Treatment Admissions per 100,000 Population**

*August 2018 - July 2019*

Source: NH Division of Public Health Services, NH Bureau of Drug & Alcohol Services, and NH Bureau of EMS

**Drug Overdose Deaths By Year**

Data Source: NH Medical Examiner's Office

2019 numbers are not finalized, and are based on analysis as of 14 August 2019
Drug Overdose Deaths:
Data Source: NH Medical Examiner’s Office

Trends:
- As of 14 August there were 184 total, confirmed drug overdose deaths, and there are 55 cases pending toxicology, for 2019.
- Thus far in 2019, Strafford County has the highest suspected drug use resulting in overdose deaths per capita, at 1.97 deaths per 10,000 population, while Hillsborough and Merrimack Counties were nearly tied for second, with 1.52 and 1.48 deaths per 10,000 population, respectively.
- The age group with the largest number of drug overdose deaths is 30-39 years, which represents 33% of all overdose deaths for 2019.

*** IMPORTANT DATA NOTES***
- Analysis is based on county where the drug(s) is suspected to have been used.

Overdose Deaths by Age 2019*
Data Source: NH Medical Examiner’s Office

*2019 numbers are not finalized, and based on analysis as of 14 August 2019

2019 Overdose Deaths by County per 10,000 Population
Data Source: NH Medical Examiner’s Office

*2019 numbers are not finalized, and are based on analysis as of 14 August 2019

+ Cocaine and Fentanyl/Heroin Related deaths are not mutually exclusive, several deaths involved both categories
Drug Overdose Deaths (Continued):

Data Source: NH Medical Examiner’s Office

**NH Drug Monitoring Initiative**

**Drug Environment Report—UNCLASSIFIED**

---

### Cocaine and/or Fentanyl Combination Related Drug Deaths 2019

![Bar Chart]

*2019 numbers are not finalized, and are based on analysis as of 14 August 2019
Source: NH Medical Examiner’s Office*

---

### Cocaine and/or Fentanyl Combination Related Drug Deaths that were noted once or twice*

<table>
<thead>
<tr>
<th>Combination</th>
<th># of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetyl Fentanyl, Cocaine, Fentanyl, Methamphetamine</td>
<td>49</td>
</tr>
<tr>
<td>Cocaine, Diazepam, Fentanyl</td>
<td>27</td>
</tr>
<tr>
<td>Cocaine, Fentanyl, Methadone</td>
<td>14</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Cocaine, Alcohol, Ethanol, Fentanyl, Methadone</td>
<td>8</td>
</tr>
<tr>
<td>Alprazolam, Cocaine, Fentanyl</td>
<td>6</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Fentanyl, Methadone</td>
<td>6</td>
</tr>
<tr>
<td>Clonazepam, Diazepam, Fentanyl</td>
<td>5</td>
</tr>
<tr>
<td>Cocaine, Ethanol, Fentanyl, Methadone</td>
<td>3</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Ethanol, Fentanyl, Oxycodeone</td>
<td>3</td>
</tr>
</tbody>
</table>

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*Cells filled with gray indicate combinations noted twice*
Overdose Deaths by Town* - 2019 *
(Data Source: NH Medical Examiner’s Office)
*Location where the drug(s) is suspected to have been used.
+2019 data was reported on August 14, 2019
There are more deaths that are suspected to be drug related, but the official cause of death is pending until the toxicology results are received.

INDEX
1 - Center Harbor
Belknap
2 - Hales Location
3 - Harms Location
4 - Hadley's Purchase
5 - Beans Grant
6 - Cutts Grant
7 - Sargents Purchase
8 - Towns Location
9 - Crawfords Purchase
10 - Chadbourn Purchase
11 - Low & Burbanks Grant
12 - Thompson & Meserves Purchase
13 - Greens Grant
14 - Martins Location
15 - Ervings Grant
16 - Wentworth Location
17 - Atkinson & Gilmanton Academy Grant
18 - Bennington
19 - South Hampton
20 - Seabrook
21 - East Kingston
22 - Kensington
23 - Hampton Falls
24 - Hampton
25 - North Hampton
26 - Rye
27 - Portsmouth
28 - New Castle
29 - Newington
30 - Rollinsford
31 - Somersworth
32 - New Ipswich
33 - Gilford
34 - Tamworth
35 - Lyman
36 - Temple
37 - Ashland
38 - Canaan
39 - Wilmot
40 - Northfield
41 - Lyme
42 - Willard
43 - Lempster
44 - Littleton
45 - Parkman
46 - Oxford
47 - Franklin
48 - Deerfield
49 - Sandwich
50 - Holderness
51 - New Hampton
52 - Litchfield
53 - Concord
54 - Bow
55 - Portsmouth
56 - Exeter
57 - Madbury
58 - Newfields
59 - Pembroke
60 - Newmarket
61 - Merrimack
62 - Allenstown
63 - Dunbarton
64 - Nevergreen
65 - Newton
66 - Hillsborough
67 - Litchfield
68 - Laconia
69 - Epsom
70 - Warren
71 - Lisbon
72 - Ossipee
73 - Gilsum
74 - New London
75 - Tuftonboro
76 - Tamworth
77 - Brookfield
78 - Wolfeboro
79 - Plaistow
80 - Henniker
81 - Tamworth
82 - Mandeville
83 - Bedford
84 - Lee
85 - Shapleigh
86 - Allen
87 - Dunstable
88 - Dunstable
89 - New Ipswich
90 - Hinsdale
91 - Chesterfield
92 - Stoddard
93 - Alstead
94 - Charlestown
95 - Barnstead
96 - New Ipswich
97 - Wentworth
98 - Hooksett
99 - Warner
100 - Nottingham
101 - Dummer
102 - Deerfield
103 - New London
104 - Alton
105 - Groton
106 - Sargent
107 - Langdon
108 - Pierce
109 - Carroll
110 - Franklin
111 - Amherst
112 - Hillsborough
113 - Berlin
114 - Hanover
115 - Sunapee
116 - Aurora
117 - New Ipswich
118 - Manchester
119 - Brookline
120 - Lebanon
121 - Littleton
122 - Gardner
123 - Grantham
124 - Lebanon
125 - Lisbon
126 - Lebanon
127 - Auburn
128 - Lincoln
129 - Newmarket
130 - Allenstown
131 - New Hampshire Academy
132 - New Ipswich
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299 - New Ipswich
EMS Narcan Administration:

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

**Trends:**
- EMS Narcan administration incidents decreased by 22% from May to June.
- In June, Hillsborough County had the most EMS Narcan administration incidents per capita with 1.67 incidents per 10,000 population. Strafford County was second, with 1.42 incidents per 10,000 population.
- The age group with the largest number of EMS Narcan administration incidents was 30-39, representing 30% of all EMS Narcan administrations for June.

**DATA UNCHANGED*** IMPORTANT DATA NOTES***
- TEMSIS, New Hampshire’s Trauma and EMS Information System, is undergoing its final transition from NEMSIS V2 to the current NEMSIS V3 standard. Currently, the EMS Narcan data is incomplete for July, and will not be available until this transition is complete.
- 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)

- Lives Saved %
  - No Improvement
  - Some Improvement
  - Negative Improvement

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 to 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 Narcan Administration by County per 10,000 Population

Source: NH Bureau of EMS

UNCLASSIFIED—AUTHORIZED FOR PUBLIC RELEASE
EMS/Narcan Administration by Town
7/1/2018 - 6/30/2019
Data Source: New Hampshire Bureau of EMS

*Incidents Where Narcan Was Administered*
Opioid Related Emergency Department Visits:
Data Source: NH Division of Public Health Services

Trends:
- Opioid related ED visits decreased by 11% from June to July.
- In July, residents from Sullivan County had the most opioid related ED visits per capita with 9.59 visits per 10,000 population.
- Strafford County residents had the second highest number of opioid related ED visits per capita with 6.70 visits per 10,000 population.
- In July, the age group with the largest number of opioid related ED visits was 30-39 year olds, with 41%.

*** 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 three (3) of the hospitals are sending ICD-10 data.
- These data include other opioid-related encounters such as poisonings, withdrawals, and detox.
Opioid Related Emergency Department Visits (Continued):

Data Source: NH Division of Public Health Services

Emergency Department Opioid Use Visits per 100,000 Population
August 2018 - July 2019

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

Source: NH Div. of Public Health Services
Trends:

- Opioid/opiate, Methamphetamine, & Cocaine/Crack treatment admissions increased from June to July by 4%.
- In July, residents from Belknap County were admitted at the highest per capita rate for opioid/opiate treatment, with 2.62 admissions per 10,000 population.
- More males than females were admitted to treatment programs in July for Opioid/Opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions decreased by 33% from June to July.
- Cocaine/Crack treatment admissions remained the same from June to July.
- Heroin/Fentanyl treatment admissions increased by 18.5% from June to July.

*** 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.
Treatment Admissions (Continued):
**Data Source: NH Bureau of Drug & Alcohol Services**

### Heroin/Fentanyl, Rx Opiate, Methamphetamine, & Cocaine/Crack Treatment Admissions by Month per 100,000 Population
August 2018 - July 2019

Source: NH Bureau of Drug & Alcohol Services

### Opioid/Opiate Treatment Admissions by County per 10,000 Population

<table>
<thead>
<tr>
<th>County</th>
<th>May</th>
<th>June</th>
<th>July</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belknap</td>
<td>2.62</td>
<td>1.15</td>
<td>0.49</td>
</tr>
<tr>
<td>Carroll</td>
<td>0.62</td>
<td>0.65</td>
<td>0.39</td>
</tr>
<tr>
<td>Cheshire</td>
<td>0.26</td>
<td>0.30</td>
<td>0.89</td>
</tr>
<tr>
<td>Coos</td>
<td>0.30</td>
<td>1.20</td>
<td>2.40</td>
</tr>
<tr>
<td>Grafton</td>
<td>1.11</td>
<td>1.55</td>
<td>1.74</td>
</tr>
<tr>
<td>Hillsborough</td>
<td>1.48</td>
<td>1.48</td>
<td>2.08</td>
</tr>
<tr>
<td>Merrimack</td>
<td>0.87</td>
<td>0.52</td>
<td>0.69</td>
</tr>
<tr>
<td>Rockingham</td>
<td>0.56</td>
<td>0.52</td>
<td>0.56</td>
</tr>
<tr>
<td>Strafford</td>
<td>1.58</td>
<td>1.74</td>
<td>2.52</td>
</tr>
<tr>
<td>Sullivan</td>
<td>0.23</td>
<td>0.39</td>
<td>2.62</td>
</tr>
</tbody>
</table>
Situational Awareness:

**Toxic Cocktail: Overdose Deaths From Mixing Fentanyl With Other Drugs On The Rise in N.H.**

**CONCORD, N.H. —** Fewer people are dying from taking fentanyl by itself this year in New Hampshire than last but more are being killed by mixing it with other drugs, like methamphetamine and cocaine — a shift that may undo recent progress in cutting the number of overdose deaths.

Through mid-July, according to the Office of the Chief Medical Examiner, the number of overdose deaths caused by fentanyl alone has fallen sharply, from 75 as of mid-July last year to 44 in the same period this year. But at the same time, 88 people have died in New Hampshire this year from taking fentanyl mixed with other drugs, twice the number (44) who died from mixing fentanyl last year.

As a result, the total number of overdose deaths in the state is slightly greater than at this time in 2018, although scores of cases are still being processed so it’s too early to be sure.

The news is no surprise to Franklin Police Chief David Goldstein, who said law enforcement has been noticing the trend. “We have spoken among ourselves on a number of occasions — we are seeing that the fentanyl is being mixed with other stuff,” he said.

Source: [www.concordmonitor.com](http://www.concordmonitor.com) 7/16/2019

<table>
<thead>
<tr>
<th>NEW HAMPSHIRE SAFE STATIONS</th>
<th>Manchester</th>
<th>Nashua</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Manchester Safe Station Began 5/4/2016</strong></td>
<td><strong>As of 7/31/2019</strong></td>
<td><strong>As of 8/23/2019</strong></td>
</tr>
<tr>
<td><strong>Nashua Gateway to Recovery Began 11/17/2016</strong></td>
<td><strong>Number of requests at MFD/NFR for Safe Station:</strong></td>
<td><strong>Number of participants transported to hospitals:</strong></td>
</tr>
<tr>
<td></td>
<td>157</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>6,012</td>
<td>1,365</td>
</tr>
<tr>
<td></td>
<td>72</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>3,098</td>
<td>383</td>
</tr>
<tr>
<td><strong>Number of participants taken to Substance Misuse Treatment Facilities:</strong></td>
<td>125</td>
<td>88</td>
</tr>
<tr>
<td></td>
<td>4,598</td>
<td>3,098</td>
</tr>
<tr>
<td></td>
<td>53</td>
<td>383</td>
</tr>
<tr>
<td></td>
<td>2,686</td>
<td></td>
</tr>
<tr>
<td><strong>Average length of time company “Not Available”:</strong></td>
<td>12.7 Min</td>
<td>14.4 Min</td>
</tr>
<tr>
<td></td>
<td>14.4 Min</td>
<td>8.8 Min</td>
</tr>
<tr>
<td></td>
<td>10.1 Min</td>
<td></td>
</tr>
<tr>
<td><strong>Number of UNIQUE participants:</strong></td>
<td>145</td>
<td>66</td>
</tr>
<tr>
<td></td>
<td>3,481</td>
<td>1,725</td>
</tr>
<tr>
<td></td>
<td>8.8 Min</td>
<td>10.1 Min</td>
</tr>
<tr>
<td><strong>Number of REPEAT participants:</strong></td>
<td>69</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>2,730</td>
<td>1,698</td>
</tr>
<tr>
<td></td>
<td>14.4 Min</td>
<td></td>
</tr>
<tr>
<td><strong>Number of unique participants seen in both City’s Safe Station Program</strong></td>
<td>515</td>
<td></td>
</tr>
</tbody>
</table>

**Manchester Man Pleads Guilty to Fentanyl Trafficking Conspiracy**

**MANCHESTER, N.H. —** Israel Perez, of Manchester, pleaded guilty in federal court to participating in a fentanyl trafficking conspiracy in a seven-defendant narcotics case, United States Attorney Scott W. Murray announced Thursday, August 22, 2019.

According to court documents and statements made in court, between May and September, 2018, Perez conspired with other persons to distribute more than 40 grams of fentanyl as part of a drug trafficking organization.

“Fentanyl traffickers make a lethal substance available for purchase in Manchester and other communities throughout New Hampshire,” said U.S. Attorney Murray. “The results have been devastating. In order to stop the flow of fentanyl, we work closely with our law enforcement partners to identify, arrest, and prosecute traffickers.”

Source: [www.justice.gov](http://www.justice.gov) 8/22/2019
Substance Use Disorder Treatment/Recovery Directory:
State funded treatment facilities in NH (NOT a complete list) - Data Source: NH Department of Health and Human Services

**BETHELHEM**
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 Mental Health Center
110 West Pearl Street
Nashua, NH
Phone: 603-889-6147

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

Greater Nashua Mental Health Center
110 West Pearl Street
Nashua, NH
Phone: 603-889-6147

A full list of Substance Use Disorder Treatment Facilities can be found [here](#).

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