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

<table>
<thead>
<tr>
<th>Section Title</th>
<th>Table of Contents:</th>
<th>Page #</th>
</tr>
</thead>
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<td>Overview</td>
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</tr>
<tr>
<td>Drug Overdose Deaths</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Drug Overdose Deaths Map</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>EMS Narcan Administration</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>EMS Narcan Administration Map</td>
<td></td>
<td>8</td>
</tr>
<tr>
<td>Opioid Related Emergency Department Visits</td>
<td></td>
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<td></td>
<td>14</td>
</tr>
</tbody>
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Previous versions of the Drug Environment Report can be found at: https://www.dhhs.nh.gov/dcbcs/brdas/data.htm

The monthly online DMI viewer can be found at: 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 2019 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
July 2019-June 2020

Drug Overdose Deaths By Year
Data Source: NH Medical Examiner's Office

*2020 numbers are not finalized, and are based on analysis as of 17 July 2020
Drug Overdose Deaths:
Data Source: NH Medical Examiner’s Office

Trends:
- As of 17 July there are 161 confirmed drug overdose deaths and 73 cases pending toxicology for 2020.
- The total drug overdose death numbers for 2019 have been finalized and there were 415 deaths.
- Drug overdose deaths decreased from 471 to 415 from 2018-2019. This represents a 12% decrease.
- So far in 2020, Strafford and Carroll Counties have the highest suspected drug use resulting in overdose deaths per capita, at 1.94 and 1.53 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 2020.

*** IMPORTANT DATA NOTES***
- ***The NHIAC recently became aware that some drug overdose death data included in prior reports reflects the location where the death occurred, not where the drug is suspected to have been used. The location data is intended to reflect the location of suspected use, as death location has the potential to change town and county level information. The NHIAC and OCME are working together to correct the issue.***

---

Overdose Deaths by Year per 100,000 Population
Data Source: NH Medical Examiner’s Office

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

---

2020 Overdose Deaths by County per 10,000 Population
Data Source: NH Medical Examiner’s Office

*2020 numbers are not finalized, and are based on analysis as of 17 July 2020
+ Cocaine and Fentanyl/Heroin Related deaths are not mutually exclusive, several deaths involved both categories

---

2020 numbers are not finalized, and are based on analysis as of 17 July 2020
### Cocaine and/or Fentanyl Combination Related Drug Deaths 2020

<table>
<thead>
<tr>
<th>Combination</th>
<th>Number of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fentanyl</td>
<td>55</td>
</tr>
<tr>
<td>Cocaine, Fentanyl</td>
<td>9</td>
</tr>
<tr>
<td>Ethanol, Fentanyl</td>
<td>7</td>
</tr>
<tr>
<td>ETOH, Fentanyl</td>
<td>6</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Fentanyl</td>
<td>5</td>
</tr>
<tr>
<td>Fentanyl, Methamphetamine</td>
<td>5</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Fentanyl, Methamphetamine</td>
<td>4</td>
</tr>
</tbody>
</table>

*2020 numbers are not finalized, and are based on analysis as of 17 JULY 2020. 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>Fentanyl, Heroin, Methadone</th>
<th>Fentanyl, Hydrocodone</th>
<th>Fentanyl, Methadephtamine, Tramadol</th>
<th>Fentanyl, Xylazine and Dextro/levomethorphan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamines, Cocaine, Fentanyl</td>
<td>Acetyl Fentanyl, Fentanyl, Methadone</td>
<td>Alprazolam, Ethanol, Fentanyl</td>
<td>Cocaine, Oxycodone</td>
<td>Ethanol, Fentanyl, Oxycodone</td>
</tr>
<tr>
<td>1, 1-difluoroethane, Etizolam, Fentanyl, Pyrazolam</td>
<td>Acetyl Fentanyl, Fentanyl, Methadone, Morphine</td>
<td>Amitriptyline, Fentanyl</td>
<td>Cocaine, Tramadol</td>
<td>ETOH, Fentanyl, Methamphetamine</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Buprenorphine, Fentanyl, Methadone</td>
<td>Acetyl Fentanyl, Fentanyl, Methadone, Morphine</td>
<td>Amphetamines, Fentanyl</td>
<td>Duloxetine, Fentanyl</td>
<td>Fentanyl, Flualprazolam</td>
</tr>
<tr>
<td>Acetyl Fentanyl, Fentanyl, Fluoxetine, Tramadol</td>
<td>Alprazolam, Amphetamines, Cocaine, Fentanyl</td>
<td>Cocaine, Ethanol, Fentanyl</td>
<td>Ethanol, Fentanyl, Gabapentin, Morphine</td>
<td>Fentanyl, Heroin</td>
</tr>
</tbody>
</table>
| *Cells filled with gray indicate combinations noted twice*

---

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4
Overdose Deaths by Town* - 2020 +
(Data Source: NH Medical Examiner’s Office)
*Location where the drug(s) is suspected to have been used.

+2020 data was reported on July 17, 2020. 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.

73 CASES PENDING
16 Cases have an unknown location

Number of Overdose Deaths by Town
*Location where the drug(s) is suspected to have been used.

- 1 - 4 (59 towns)
- 5 - 10 (3 towns)
- 11 - 25 (1 towns)
- 26 - 50 (1 towns)

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

Trends:
- EMS Narcan administration incidents decreased by 11% from May to June.
- In June, Strafford County had the most EMS Narcan administration incidents per capita with 1.47 incidents per 10,000 population. Cheshire County had the second highest with 1.16 incidents per 10,000 population.
- The age group with the largest number of EMS Narcan administration incidents was 30-39, representing 32% of all EMS Narcan administrations in June.

*** IMPORTANT DATA NOTES***
- **UPDATE: TEMSIS, New Hampshire’s Trauma and EMS Information System, has been updated and now reflects current data.**
- 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)

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 - Lives Saved %
July 2019 - June 2020

Source: NH Bureau of EMS

EMS Narcan Administration - Lives Saved

<table>
<thead>
<tr>
<th>Source: NH Bureau of EMS</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>RODS Outcome</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lives Saved</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RODS Score of 8+</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Some Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RODS Score of 1-7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RODS Score of 0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative Improvement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative RODS Score</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>162</td>
<td>158</td>
</tr>
</tbody>
</table>

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 Narcan Administration by County per 10,000 Population

Source: NH Bureau of EMS
EMS/Narcan Administration by Town
7/1/2019 - 6/30/2020
Data Source: New Hampshire Bureau of EMS

*Incidents Where Narcan Was Administered*

- 1 - 10
- 11 - 25
- 26 - 50
- 51 - 100
- 101 - 200
- 201 - 500
Opioid Related Emergency Department Visits:
Data Source: NH Division of Public Health Services

*Important Note* the data being reported for 2020 has different collection criteria than previous months. Due to the new collection criteria, new data is no longer comparable to previous data.

Trends:
- Opioid related ED visits decreased by 7% from May to June.
- In June, residents from Strafford County had the most opioid related ED visits per capita with 2.56 visits per 10,000 population.
- In June, Cheshire County residents had the second highest number of opioid related ED visits per capita with 2.44 visits per 10,000 population.
- In June, the age group with the largest number of opioid related ED visits was 20-29 year olds, with 26%.

*** 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 one (1) of the hospitals are sending ICD-10 data.
- These data include other opioid-related encounters such as poisonings, withdrawals, and detox.
- These data are now collected using criteria the CDC established for their Overdose Data to Action (OD2A) grant “making this report more transparent.”

Emergency Department Opioid Use Visits by Month per 100,000 Population
January 2020 - June 2020

Emergency Department Opioid Use Visits by County per 10,000 Population
June 2020
Opioid Related Emergency Department Visits (Continued):

Data Source: NH Division of Public Health Services

Emergency Department Opioid Use Visits per 100,000 Population
January 2020 - June 2020

Source: NH Div. of Public Health Services

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 25% from May to June.
- In June, residents from Hillsborough & Strafford County were admitted at the highest per capita rate for opioid/opiate treatment, with 1.40 admissions per 10,000 population.
- More males than females were admitted to treatment programs in June for Opioid/Opate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions decreased 23% from May to June.
- Cocaine/Crack treatment admissions increased 120% from May to June.
- Heroin/Fentanyl treatment admissions increased by 32% from May to June.

*** 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

**July 2019-June 2020**

<table>
<thead>
<tr>
<th>Month</th>
<th>Heroin/Fentanyl</th>
<th>Rx Opiates</th>
<th>Methamphetamine</th>
<th>Cocaine/Crack</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>0.65</td>
<td>0.21</td>
<td>0.13</td>
<td>0.60</td>
</tr>
<tr>
<td>Aug</td>
<td>0.62</td>
<td>0.13</td>
<td>0.33</td>
<td>0.33</td>
</tr>
<tr>
<td>Sep</td>
<td>1.23</td>
<td>0.39</td>
<td>1.20</td>
<td>0.45</td>
</tr>
<tr>
<td>Oct</td>
<td>1.20</td>
<td>0.60</td>
<td>1.09</td>
<td>1.23</td>
</tr>
<tr>
<td>Nov</td>
<td>1.43</td>
<td>0.77</td>
<td>1.16</td>
<td>1.20</td>
</tr>
<tr>
<td>Dec</td>
<td>1.40</td>
<td>0.60</td>
<td>0.87</td>
<td>0.23</td>
</tr>
<tr>
<td>Jan</td>
<td></td>
<td>0.73</td>
<td>0.62</td>
<td>0.19</td>
</tr>
<tr>
<td>Feb</td>
<td></td>
<td>0.64</td>
<td>0.87</td>
<td>0.62</td>
</tr>
<tr>
<td>Mar</td>
<td></td>
<td>0.23</td>
<td>0.78</td>
<td>0.45</td>
</tr>
<tr>
<td>Apr</td>
<td></td>
<td>0.19</td>
<td>0.23</td>
<td>0.45</td>
</tr>
<tr>
<td>May</td>
<td></td>
<td>0.64</td>
<td>0.23</td>
<td>0.45</td>
</tr>
<tr>
<td>June</td>
<td></td>
<td>1.40</td>
<td>1.36</td>
<td>0.45</td>
</tr>
</tbody>
</table>

#### Opioid/Opiate Treatment Admissions by County

**per 10,000 Population**

<table>
<thead>
<tr>
<th>County</th>
<th>Apr</th>
<th>May</th>
<th>June</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belknap</td>
<td>0.65</td>
<td>0.49</td>
<td>0.49</td>
</tr>
<tr>
<td>Carroll</td>
<td>0.62</td>
<td>0.21</td>
<td>0.21</td>
</tr>
<tr>
<td>Cheshire</td>
<td>0.39</td>
<td>0.13</td>
<td>0.13</td>
</tr>
<tr>
<td>Coos</td>
<td>0.60</td>
<td>0.33</td>
<td>0.33</td>
</tr>
<tr>
<td>Grafton</td>
<td>0.77</td>
<td>1.09</td>
<td>1.09</td>
</tr>
<tr>
<td>Hillsborough</td>
<td>1.43</td>
<td>1.16</td>
<td>1.16</td>
</tr>
<tr>
<td>Merrimack</td>
<td>0.60</td>
<td>0.73</td>
<td>0.73</td>
</tr>
<tr>
<td>Rockingham</td>
<td>0.64</td>
<td>0.62</td>
<td>0.62</td>
</tr>
<tr>
<td>Strafford</td>
<td>1.40</td>
<td>1.36</td>
<td>1.36</td>
</tr>
<tr>
<td>Sullivan</td>
<td>0.45</td>
<td>0.23</td>
<td>0.23</td>
</tr>
</tbody>
</table>

Source: NH Bureau of Drug & Alcohol Services

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NH Drug Monitoring Initiative

Drug Environment Report—UNCLASSIFIED

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12
Situational Awareness:

Overdose Deaths Up Compared to 2019

The number of overdose deaths in New Hampshire has increased by about 30% since last year, according to new data from the Medical Examiner’s Office.

In May, the state reported 45 fatal overdoses, compared to 35 in May of 2019. The majority of the overdoses this year involved a combination of fentanyl and other drugs, followed by fentanyl alone. The State has had the highest rate of fentanyl overdose deaths per capita in the United States for many years, according to a study published in April.

Overdose deaths in 2020 had been relatively consistent with the 2019 numbers until April when the number spiked.

Jake Berry, the vice president of policy at health nonprofit New Futures, attributes this increase to the pandemic, which has created a number of risk factors for those struggling with addiction, such as economic instability and anxiety.

Many addiction advocates predicted this spike. Early in the pandemic, very few people were going to emergency rooms for help with substance abuse which, Berry said, likely meant people weren’t getting the help they needed.

Manchester and Nashua contained the majority of the deaths while Concord had only two confirmed fatal overdoses in 2020.

Source: www.concordmonitor.com 07/14/2020

NEW HAMPSHIRE SAFE STATIONS

Manchester Safe Station Began 5/4/2016

Manchester

As of 06/30/2020

<table>
<thead>
<tr>
<th></th>
<th>Q2 2020</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of requests at MFD for Safe Station:</td>
<td>193</td>
<td>7,216</td>
</tr>
<tr>
<td>Number of participants transported to hospitals:</td>
<td>42</td>
<td>1,578</td>
</tr>
<tr>
<td>Number of participants taken to Substance Misuse Treatment Facilities:</td>
<td>44</td>
<td>5,455</td>
</tr>
<tr>
<td>Average length of time company “Not Available”:</td>
<td>11.0 Min</td>
<td>13.7 Min</td>
</tr>
<tr>
<td>Number of UNIQUE participants:</td>
<td>141</td>
<td>3,954</td>
</tr>
<tr>
<td>Number of REPEAT participants:</td>
<td>55</td>
<td>3,440</td>
</tr>
<tr>
<td>Number of unique participants seen in both City’s Safe Station Program</td>
<td>558</td>
<td></td>
</tr>
</tbody>
</table>

NH Drug Treatment Providers Struggling Financially Amid Pandemic

A new survey shows that the COVID-19 pandemic has been costly for drug treatment providers in New Hampshire.

The report, recently released by the nonprofit organization New Futures, surveyed 23 substance-use treatment providers statewide about how the pandemic has affected them in areas such as revenue and staffing.

Substantial financial losses were found across the board due to fewer patients coming in during the public health crisis, as well as canceled fundraising or income-driven events, according to President and CEO Michele Merritt.

Many of the organizations said this could lead to staffing reductions.

Source: www.sentinelsource.com 07/22/2020

Source: www.concordmonitor.com 07/14/2020
**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*

**BETLEHAM**  
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

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

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

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

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

A full list of Substance Use Disorder Treatment Facilities can be found here.  
A treatment locator can be found here.