**New Hampshire Drug Monitoring Initiative**

New Hampshire Information & Analysis Center

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March 2017 Report

**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.

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⇒ Year/month overview charts are based on annual estimates from the above website. County charts are based on a 2015 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 EMS Narcan Incidents, Opioid Related ED Visits, Treatment Admissions, and Overdose Deaths:

EMS Narcan Administration, Opioid Related ED Visits, and Treatment Admissions per 100,000 Population
April 2016 - March 2017

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

* 2016 Numbers are based on analysis as of 8 April 2017 - 9 Cases still pending

UNCLASSIFIED—AUTHORIZED FOR PUBLIC RELEASE
Drug Overdose Deaths:

Data Source: NH Medical Examiner’s Office

Trends:
- Drug overdose deaths are projected to increase by 9% from 2015 to 2016.
- In 2016 Hillsborough County had the highest suspected drug use resulting in overdose deaths per capita at 4.77 deaths per 10,000 population.
- Strafford County had the second highest suspected drug use resulting in overdose deaths per capita at 4.47 deaths per 10,000 population.
- The age group with the largest number of drug overdose deaths is 30-39 which represents 31% of all overdose deaths for 2016.
- Fentanyl only deaths accounted for 198 deaths. Cocaine and Fentanyl only deaths accounted for 25 deaths in 2016.

*** IMPORTANT DATA NOTES***
- 2016 Numbers are based on analysis as of 8 April 2017. There are 9 cases from 2016 that are “pending toxicology”. It can take 2-3 months to receive toxicology results and determine the cause of death.
- Analysis is based on county where the drug(s) is suspected to have been used.
- Cocaine and Fentanyl/Heroin Related deaths are not mutually exclusive, several deaths involved both categories.

Overdose Deaths by Year per 100,000 Population

Data Source: NH Medical Examiner’s Office

Overdose Deaths by Age 2016*

Data Source: NH Medical Examiner’s Office

2016* Overdose Deaths by County per 10,000 Population

* 2016 Numbers are based on analysis as of 8 April 2017 - 9 cases still pending

Source: NH Medical Examiner’s Office
Drug Overdose Deaths (Continued):

Cocaine Combinations
- Cocaine; Fentanyl: 25
- Cocaine: 13
- Acetyl Fentanyl; Cocaine; Fentanyl: 3
- Cocaine; Ethanol; Fentanyl: 3
- Cocaine; Fentanyl; Heroin: 3
- Acetyl Fentanyl; Cocaine; Fentanyl; Heroin: 2
- Cocaine; Fentanyl; Methamphetamine: 2
- Cocaine; Fentanyl; Methadone: 1
- Cocaine; Fentanyl; Oxycodone: 1
- Cocaine; Heroin: 1

Fentanyl Combinations
- Fentanyl: 198
- Acetyl Fentanyl; Fentanyl: 32
- Cocaine; Fentanyl: 25
- Ethanol; Fentanyl: 16
- Fentanyl; Heroin: 9
- Fentanyl; Oxycodone: 8
- Fentanyl; Methamphetamine: 4
- Fentanyl; Morphine: 4
- Acetyl Fentanyl; Cocaine; Fentanyl: 3
- Cocaine; Ethanol; Fentanyl: 3
- Cocaine; Fentanyl; Heroin: 3
- Acetyl Fentanyl; Cocaine; Fentanyl; Heroin: 2

*2016 Numbers are based on analysis as of 8 April, 2017
Source: NH Medical Examiner’s Office

UNCLASSIFIED—AUTHORIZED FOR PUBLIC RELEASE
Overdose Deaths by Town* - 2016+
(Data Source: NH Medical Examiner’s Office)
*Location where the drug(s) is suspected to have been used.
+2016 data was reported on April 8, 2017
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.

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

- 1 - 4
- 5 - 10
- 11 - 25
- 26 - 50
- 51 and greater
EMS Narcan Administration:

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

Trends:
- EMS Narcan administration decreased by 5% from February to March.
- In March Hillsborough County had the most EMS Narcan administration incidents per capita with 2.28 incidents per 10,000 population.
- Based on absolute numbers Hillsborough County had the most Narcan incidents with 92 incidents in March.
- The age group with the largest number of EMS Narcan administration incidents is 20-29 which represents 32% of all EMS Narcan administration incidents for January.
- NH Bureau of EMS “lives saved” has decreased by 5.4% from February to March.

*** 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 is administered in cases of cardiac arrest when the cause of the arrest cannot be determined. It therefore cannot be concluded that all of the reported Narcan cases involved drugs.
EMS Narcan Administration (Continued):
Data Source: NH Bureau of Emergency Medical Services (EMS)

EMS Narcan Administration - Lives Saved
April 2016 - March 2017

EMS Narcan Administration—Lives Saved
Source: NH Bureau of EMS

<table>
<thead>
<tr>
<th>Source: NH Bureau of EMS</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>RODS Outcome</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Improvement</td>
<td>97</td>
<td>61</td>
</tr>
<tr>
<td>Some Improvement</td>
<td>29</td>
<td>30</td>
</tr>
<tr>
<td>Negative Improvement</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>Lives Saved</td>
<td>94</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>220</td>
<td>202</td>
</tr>
</tbody>
</table>

Lives saved is based on a calculation of the improvement in respiration of greater than 4 after treatment or a combined improvement of the delta of respiratory rate and GCS (measure of alertness) of 6 or greater.

EMS Narcan Administration by County per 10,000 Population

Source: NH Bureau of EMS

Lives saved is based on a calculation of the improvement in respiration of greater than 4 after treatment or a combined improvement of the delta of respiratory rate and GCS (measure of alertness) of 6 or greater.
Opioid Related Emergency Department Visits:
Data Source: NH Division of Public Health Services

Trends:
- Opioid related ED visits increased by 28% from February — March 2017.
- In March residents from Hillsborough County had the most opioid related ED visits per capita with 6.75 visits per 10,000 population.
- Merrimack County had the second highest number of opioid related ED visits per capita with 6.29 visits per 10,000 population.
- The age group with the largest number of opioid related ED visits is 20-29 which represents 38% of all opioid related ED visits for March.

*** 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.

Source: NH Division of Public Health Services

March Emergency Department Opioid Use Visits by Age

Source: NH Division of Public Health Services

Emergency Department Opioid Use Visits by Month per 100,000 Population
October 2015 - March 2017

Source: NH Division of Public Health Services

March 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

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**Emergency Department Opioid Use Visits per 100,000 Population**

_April 2016 - March 2017_

- Graph showing the number of emergency department opioid use visits per 100,000 population from April 2016 to March 2017.

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**Emergency Department Opioid Use Visits by County**

_per 10,000 Population_

- Bar chart showing the number of emergency department opioid use visits per 10,000 population by county for January, February, and March.

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Source: NH Div. of Public Health Services
Trends:
- Opioid/opiate treatment admissions had no change from February to March.
- In March residents from Hillsborough County were admitted most often for opioid/opiate treatment per capita with 1.95 admissions per 10,000 population.
- More males than females were admitted to treatment programs in March for opioid/opiate use.
- Methamphetamine treatment admissions increased by 8% from February to March.
- Cocaine/Crack treatment admissions remained the same from February to March.

*** IMPORTANT DATA NOTES***
- County represents where the patient resides.
- These data represent treatment admissions to state funded facilities.
- Methamphetamine and Cocaine/Crack gender data was not available at time of this report.
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
April 2016 - March 2017

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

Source: NH Bureau of Drug & Alcohol Services
I presume that one of the most difficult parts of each of your positions is letting people know the work that you do. In relation to my position, I am repeatedly asked about the work that is done by the state in relation to the “drug crisis”—given all of the dedicated hard work it is somewhat difficult to give a five minute “elevator speech.” Specifically related to that, I am frequently asked about the Governor’s Commission on Alcohol and Drug Abuse Prevention, Treatment and Recovery (Commission). The State of New Hampshire’s strategic and coordinated response to the “drug crisis” is driven by the Governor, the General Court, state agencies, the Commission and associated Task Forces (Healthcare, Joint Military, Opioid, Perinatal Substance Exposure, Data and Evaluation, Prevention, Treatment, and Recovery), and the innovative efforts of local communities, nonprofit organizations, and dedicated volunteers. The Commission, which was initiated in 2001, includes the aforementioned task forces, and is comprised of diverse stakeholders, who work with multiple partners from the public and private sectors at both the community and state level. The Commission shepherded the implementation of the statewide strategic plan, Collective Action-Collective Impact: NH’s Strategy for Reducing the Misuse of Alcohol and other Drugs and Promoting Recovery 2013-2017, which utilizes a comprehensive public health approach to address the misuse of alcohol and other drugs in New Hampshire. It is undergoing revision and an updated strategy will be re-released in 2017.

### NEW HAMPSHIRE SAFE STATIONS


<table>
<thead>
<tr>
<th>Manchester As of: 4/14/2017</th>
<th>Nashua As of: 4/14/2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of requests at MFD/NFR for Safe Station: 1529</td>
<td>318</td>
</tr>
<tr>
<td>Number of participants transported to Hospitals: 201</td>
<td>45</td>
</tr>
<tr>
<td>Number of participants taken to HOPE in NH: 347</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of participants taken to Serenity Place: 977</td>
<td>N/A</td>
</tr>
<tr>
<td>Number of participants taken to PSL facilities: N/A</td>
<td>265</td>
</tr>
<tr>
<td>Number of participants seen for ODs prior to seeking SS Help: ——</td>
<td>56</td>
</tr>
<tr>
<td>Average Length of Time MFD/NRF Company “Not Available”: 14 min</td>
<td>11:16 min</td>
</tr>
<tr>
<td>Number of UNIQUE participants: 1100</td>
<td>247</td>
</tr>
<tr>
<td>Number of REPEAT participants: 237</td>
<td>71</td>
</tr>
<tr>
<td>Age Range of Participants: 18-70</td>
<td>18-65</td>
</tr>
</tbody>
</table>

### More People Now Dying From Fentanyl than Heroin in New Hampshire

According to WMUR, a powerful synthetic drug is the number one culprit behind dozens of overdose deaths so far this year in New Hampshire. According to the numbers from the Office of the Chief Medical Examiner, 18 people have died because of fentanyl. There have been no deaths caused by heroin alone in 2017.

A total of two people have died because of a mixture of heroin and fentanyl. Eighty-six deaths are still pending toxicology reports. Last year, fentanyl killed nearly 200 people in New Hampshire.

Source: www.WMUR.com
Substance Abuse Treatment/Recovery Directory:
State funded treatment facilities in NH (NOT a complete list) - Data Source: NH Department of Health and Human Services

BERLIN
Tri-County Community Action Programs Inc.
30 Exchange Street
Berlin, NH 03570

CANNAN
HALO Educational Systems
44 Roberts Road
Canaan, NH 03741

CONCORD
Concord Hospital
The Fresh Start Program
(Intensive Outpatient 18 years and older and Outpatient Services.)
250 Pleasant Street, Suite 5400
Concord, NH 03301
Phone: 603-225-2711 ext. 2521

DOVER
Southeastern NH Alcohol and Drug Abuse Services
(Outpatient and Intensive Outpatient Services.)
272 County Farm Road
Dover, NH 03820
Crisis Center: 603-516-8181
Main: 603-516-8160

GILFORD
Horizons Counseling Center
(Intensive Outpatient 18 years and older and Outpatient Services.)
25 Country Club Road Suite #705
Gilford, NH 03249
Phone: 603-524-8005

HAVERHILL
Grafton County House of Corrections
Dartmouth College Road
Haverhill, NH 03765

LEBANON
Headrest
12 Church Street
PO Box 247
Lebanon, NH 03766
Hotline: 603-448-4400 or 800-639-6095
Phone: 603-448-4872

MANCHESTER
Families in Transition
(Provides services for parenting women including pregnant women, intensive outpatient services; housing and comprehensive social services.)
122 Market Street
Manchester, NH 03104
Phone: 603-641-9441
Manchester Alcoholism and Rehabilitation Center
(Intensive Outpatient 18 years and older and Outpatient Services.)
555 Auburn Street
Manchester, NH 03101
Phone: 603-263-6287

NASHUA
Greater Nashua Council on Alcoholism
Keystone Hall
(Outpatient and Intensive Outpatient Services for Adults, Adolescents and Their Families.)
615 Amherst Street
Nashua, NH 03063
Phone: 603-943-7971 Ext. 3

The Youth Council
(Outpatient for Adolescents and Families.)
112 W. Pearl Street
Nashua, NH 03060
Phone: 603-889-1090

PORTSMOUTH
Families First of the Greater Seacoast
(Pregnant and Parenting Women, Primary Care Setting, Outpatient.)
100 Campus Drive, Suite 12
Portsmouth, NH 03801
Phone: 603-422-8208 Ext. 150

SOMERSWORTH
Goodwin Community Health Center
311 NH-108
Somersworth, NH 03878

Phoenix Houses of New England
Locations in: Dublin, Keene, Northfield

A full list of Substance Abuse and Treatment Facilities can be found here.
A treatment locator can be found here.