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/dhcs/bdas/data.htm](https://www.dhhs.nh.gov/dhcs/bdas/data.htm)


⇒ 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
December 2016 - November 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

* 2017 Numbers are based on analysis as of 7 December 2017 - 89 Cases Pending
Trends:
- At this time, drug overdose deaths are projected to decrease by 4% from 2016 to 2017.
- In 2017 thus far, Hillsborough County has the highest suspected drug use resulting in overdose deaths per capita at 3.46 deaths per 10,000 population.
- Strafford County had the next highest suspected drug use resulting in overdose deaths per capita at 2.95 deaths per 10,000 population.
- The age group with the largest number of drug overdose deaths is 30-39 which represents 28% of all overdose deaths for 2017.
- As released by the Attorney General’s Office, there have been 12 deaths related to the use of carfentanil in 2017.

*** IMPORTANT DATA NOTES***
- 2017 Numbers are based on analysis as of 7 December, 2017.
- There are currently 89 cases “pending toxicology” for 2017.
- Analysis is based on county where the drug (s) is suspected to have been used.

* 2017 Projected numbers are based on analysis as of 7 December 2017 - 89 cases still pending
+ Cocaine and Fentanyl/Heroin Related deaths are not mutually exclusive, several deaths involved both categories

* 2017 Numbers are based on analysis as of 7 December, 2017
Drug Overdose Deaths (Continued):

Data Source: NH Medical Examiner's Office

Fentanyl Combinations (Top 10)

<table>
<thead>
<tr>
<th>Combination</th>
<th># of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fentanyl</td>
<td>144</td>
</tr>
<tr>
<td>Acetyl Fentanyl; Fentanyl</td>
<td>25</td>
</tr>
<tr>
<td>Ethanol; Fentanyl</td>
<td>14</td>
</tr>
<tr>
<td>Cocaine; Fentanyl</td>
<td>12</td>
</tr>
<tr>
<td>Fentanyl; Heroin</td>
<td>10</td>
</tr>
<tr>
<td>Carfentanil; Fentanyl</td>
<td>5</td>
</tr>
<tr>
<td>Acetyl Fentanyl; Ethanol; Fentanyl</td>
<td>3</td>
</tr>
<tr>
<td>Fentanyl; Methamphetamine</td>
<td>3</td>
</tr>
<tr>
<td>Acetyl Fentanyl</td>
<td>2</td>
</tr>
<tr>
<td>Acetyl Fentanyl; Cocaine; Fentanyl; Heroin</td>
<td>2</td>
</tr>
</tbody>
</table>

Cocaine Combination Related Drug Deaths 2017*

<table>
<thead>
<tr>
<th>Combination</th>
<th># of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cocaine; Fentanyl</td>
<td>12</td>
</tr>
<tr>
<td>Cocaine</td>
<td>6</td>
</tr>
<tr>
<td>Acetyl Fentanyl; Cocaine; Fentanyl; Heroin</td>
<td>2</td>
</tr>
<tr>
<td>Clonazepam; Cocaine; Fentanyl</td>
<td>2</td>
</tr>
<tr>
<td>Cocaine; Ethanol; Fentanyl</td>
<td>2</td>
</tr>
<tr>
<td>Cocaine; Fentanyl; Heroin</td>
<td>2</td>
</tr>
<tr>
<td>Alprazolam; Cocaine; Ethanol</td>
<td>1</td>
</tr>
<tr>
<td>Buprenorphine; Cocaine; Fentanyl</td>
<td>1</td>
</tr>
<tr>
<td>Cocaine; Fentanyl; Methamphetamine</td>
<td>1</td>
</tr>
<tr>
<td>Cocaine; Heroin</td>
<td>1</td>
</tr>
</tbody>
</table>

*2017 Numbers are based on analysis as of 7 December, 2017
Source: NH Medical Examiner's Office
Overdose Deaths by Town - 2017
(Data Source: NH Medical Examiner’s Office)
*Location where the drug(s) is suspected to have been used.

+2017 data was reported on December 7, 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.
89 cases pending
EMS Narcan Administration:
Data Source: NH Bureau of Emergency Medical Services (EMS)

Trends:
- EMS Narcan administration incidents decreased by 15.2% from October to November.
- In November Belknap County had the most EMS Narcan administration incidents per capita with 3.15 incidents per 10,000 population.
- Based on absolute numbers Hillsborough County had the most Narcan incidents with 89 incidents in November.
- The age group with the largest number of EMS Narcan administration incidents is 20-29 which represents 35% of all EMS Narcan administration incidents for November.
- NH Bureau of EMS Percentage of “lives saved” decreased by 15.2% from October to November.

*** 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
Source: NH Bureau of EMS

<table>
<thead>
<tr>
<th>RODS Outcome</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Improvement</td>
<td>Dec</td>
<td>Jan</td>
</tr>
<tr>
<td>RODS Score of 0</td>
<td>81</td>
<td>61</td>
</tr>
<tr>
<td></td>
<td>76</td>
<td>74</td>
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<tr>
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<td>71</td>
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<tr>
<td></td>
<td>84</td>
<td>91</td>
</tr>
<tr>
<td>Some Improvement</td>
<td>24</td>
<td>30</td>
</tr>
<tr>
<td>RODS Score 1-7</td>
<td>20</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>23</td>
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<td>28</td>
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<td>26</td>
<td>21</td>
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<tr>
<td>Negative Improvement</td>
<td>12</td>
<td>11</td>
</tr>
<tr>
<td>Negative RODS Score</td>
<td>11</td>
<td>11</td>
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<td>18</td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>11</td>
</tr>
<tr>
<td>Lives Saved</td>
<td>94</td>
<td>100</td>
</tr>
<tr>
<td>RODS Score of 8+</td>
<td>100</td>
<td>93</td>
</tr>
<tr>
<td></td>
<td>88</td>
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<td>86</td>
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<td>134</td>
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<td>127</td>
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<td>113</td>
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<tr>
<td>Total</td>
<td>211</td>
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<tr>
<td></td>
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<td>292</td>
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<td>250</td>
<td>250</td>
</tr>
<tr>
<td></td>
<td>212</td>
<td>212</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 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 Town
12/1/2016 – 11/30/2017
Data Source: New Hampshire Bureau of EMS

"Incidents Where Narcan Was Administered"

- 0
- 1 - 10
- 11 - 25
- 26 - 50
- 51 - 100
- 101 - 200
- 201 - 500
- 501 - 750

Prepared by:
NH Information & Analysis Center
Opioid Related Emergency Department Visits:
Data Source: NH Division of Public Health Services

Trends:
- Opioid related ED visits decreased by 16% from October to November 2017.
- In November residents from Strafford County had the most opioid related ED visits per capita with 6.54 visits per 10,000 population.
- Merrimack County residents had the second highest number of opioid related ED visits per capita with 5.55 visits per 10,000 population.
- The age group with the largest number of opioid related ED visits was 20-29 with 39% of all opioid related ED visits for November.

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

Data Source: NH Division of Public Health Services

Emergency Department Opioid Use Visits per 100,000 Population
December 2016 - November 2017

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 decreased by 6% from October to November.
- In November residents from Hillsborough County were admitted most often for opioid/opiate treatment per capita with 1.63 admissions per 10,000 population.
- More males than females were admitted to treatment programs in November for opioid/opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions decreased by 22% from October to November.
- Cocaine/Crack treatment admissions increased by 6.81% from October to November.
- Heroin/Fentanyl treatment admissions decreased by 5.61% from October to November.

*** IMPORTANT DATA NOTES***
- County represents where the patient resides.
- These data represent treatment admissions to state funded facilities.

**November Opioid/Opiate Admissions by Gender**

```
<table>
<thead>
<tr>
<th>Gender</th>
<th>Admissions per 100,000 pop</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>0.33</td>
</tr>
<tr>
<td>Female</td>
<td>0.13</td>
</tr>
<tr>
<td>Transgender</td>
<td>0.04</td>
</tr>
</tbody>
</table>
```

Source: NH Bureau of Drug & Alcohol Services

**November Opioid/Opiate, Methamphetamine, & Cocaine/Crack Treatment Admissions by County per 10,000 Population**

```
<table>
<thead>
<tr>
<th>County</th>
<th>Opioid/Opiate</th>
<th>Methamphetamine</th>
<th>Cocaine/Crack</th>
</tr>
</thead>
<tbody>
<tr>
<td>Betteb</td>
<td>1.16</td>
<td>1.04</td>
<td>0.33</td>
</tr>
<tr>
<td>Carroll</td>
<td>0.89</td>
<td>0.99</td>
<td>0.17</td>
</tr>
<tr>
<td>Cheshire</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Coos</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Dover</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Hillsborough</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Merrimack</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Nashua</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Stafford</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
<tr>
<td>Sullivan</td>
<td>0.67</td>
<td>0.89</td>
<td>0.17</td>
</tr>
</tbody>
</table>
```

Source: NH Bureau of Drug & Alcohol Services
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
December 2016 - November 2017

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

Source: NH Bureau of Drug & Alcohol Services
### Situational Awareness:

**CDC Ranks NH Third Highest State for Drug Overdose Deaths**

Last week the CDC issued a report showing that New Hampshire had the Third-highest age-adjusted drug overdose death rate in 2016 and that more Americans died of drug overdoses last year than in any previous year on record. The data also found—for the first time—that fentanyl, not heroin, is now the deadliest opioid.

According to the CDC report, 39 Granite Staters for every 100,000 die from a drug overdose. New Hampshire’s mortality rate is nearly double the national average, which is 19 deaths for every 100,000 people.

The state’s Congressional delegation has called on Congress to release additional funds to fight the drug crisis in response to the latest data released by the Centers for Disease Control and Prevention.

“This report is yet another painful reminder of how much work we still must do to save lives and turn the tide of the opioid crisis,” said US Sen. Maggie Hassan. Congress must act now to provide additional federal resources to strengthen treatment, prevention, recovery and law enforcement efforts and give those on the front lines the support they need to fight this epidemic.”

Source: [www.conwaydailysun.com](http://www.conwaydailysun.com) 12/27/2017

### NEW HAMPSHIRE SAFE STATIONS

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>As of:</strong></td>
<td></td>
</tr>
<tr>
<td>Manchester</td>
<td>Nashua</td>
</tr>
<tr>
<td>12/22/2017</td>
<td>12/1/2017</td>
</tr>
</tbody>
</table>

- **Number of requests at MFD/NFR for Safe Station:** 2873 | 1212
- **Number of participants transported to Hospitals:** 607 | 127
- **Number of participants taken to HOPE in NH:** 347 | N/A
- **Number of participants taken to Serenity Place:** 1907 | N/A
- **Average Length of Time MFD/NRF Company “Not Available”:** 14 min | 11 min
- **Number of UNIQUE participants:** 1966 | 697
- **Number of REPEAT participants:** 467 | 224
- **Age Range of Participants:** 16-70 | -

### Opioid abuse in the U.S. is so Bad It’s Lowering Life Expectancy. Why Hasn’t the Epidemic Hit Other Countries

For the second year in a row, life expectancy in the US has dropped. In 2016, there was a 21 percent rise in the number of deaths caused by drug overdoses, with opioids causing two-thirds of them. Last year, the opioid epidemic killed 42,000 people, more than died of AIDS in any year at the height of the crisis.

In no other developed country are people taking and dying from opioids at the rate they are in the United States. We have about 4 percent of the world’s population but about 27 percent of the world’s drug-overdose deaths.

Americans are prescribed opioids significantly more often than their counterparts in other countries. In the United States, 50,000 opioid doses are taken daily per every million residents. This is nearly 40 percent higher than the rate in Germany and Canada, and double the rate in Austria and Denmark.

Source: [www.washingtonpost.com](http://www.washingtonpost.com) 12/28/2017
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

**CANAAN**
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 03349
Phone: 603-524-8005

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

**LEBANON**
Headrest
12 Church Street
PO Box 247
Lefebvre, 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
(Outpatient and Intensive Outpatient 18 years and older and Outpatient Services.)
555 Auburn Street
Manchester, NH 03101
Phone: 603-263-6287

National Council on Alcoholism and Drug Dependence—Greater Manchester
101 Manchester St.
Manchester, NH 03101

**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.](#)