



New Hampshire Drug Monitoring Initiative

New Hampshire Information & Analysis Center

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NHIAC Product #: 2018-3543

October 2018 Report

21 November 2018

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.

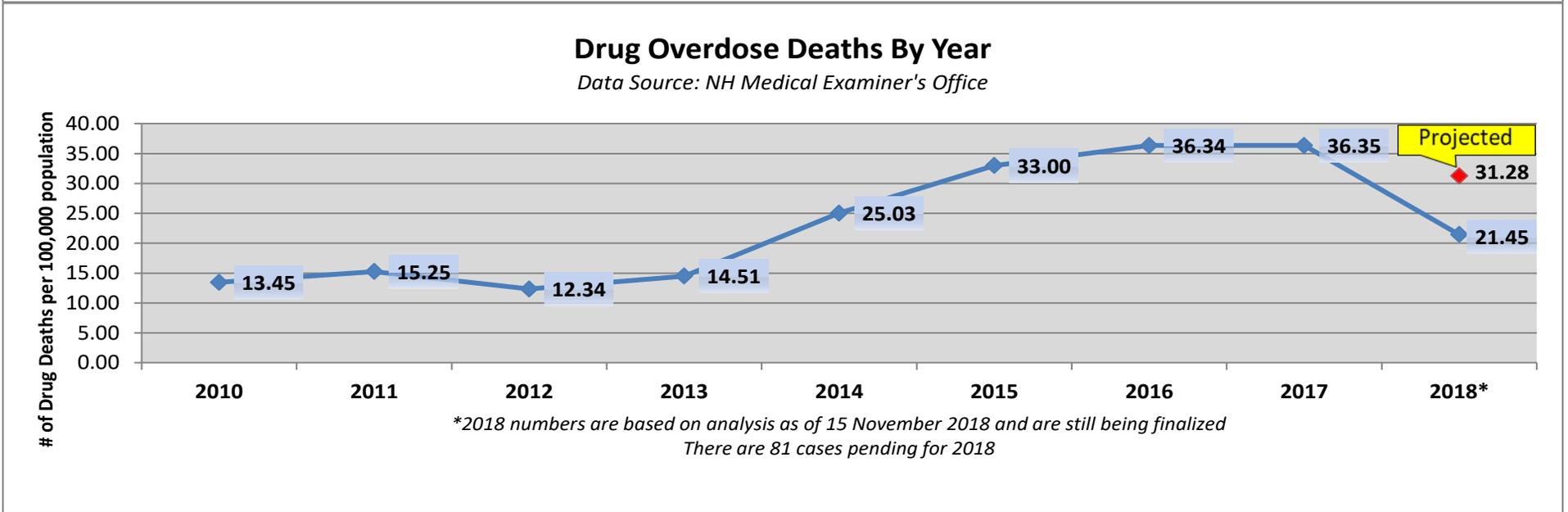
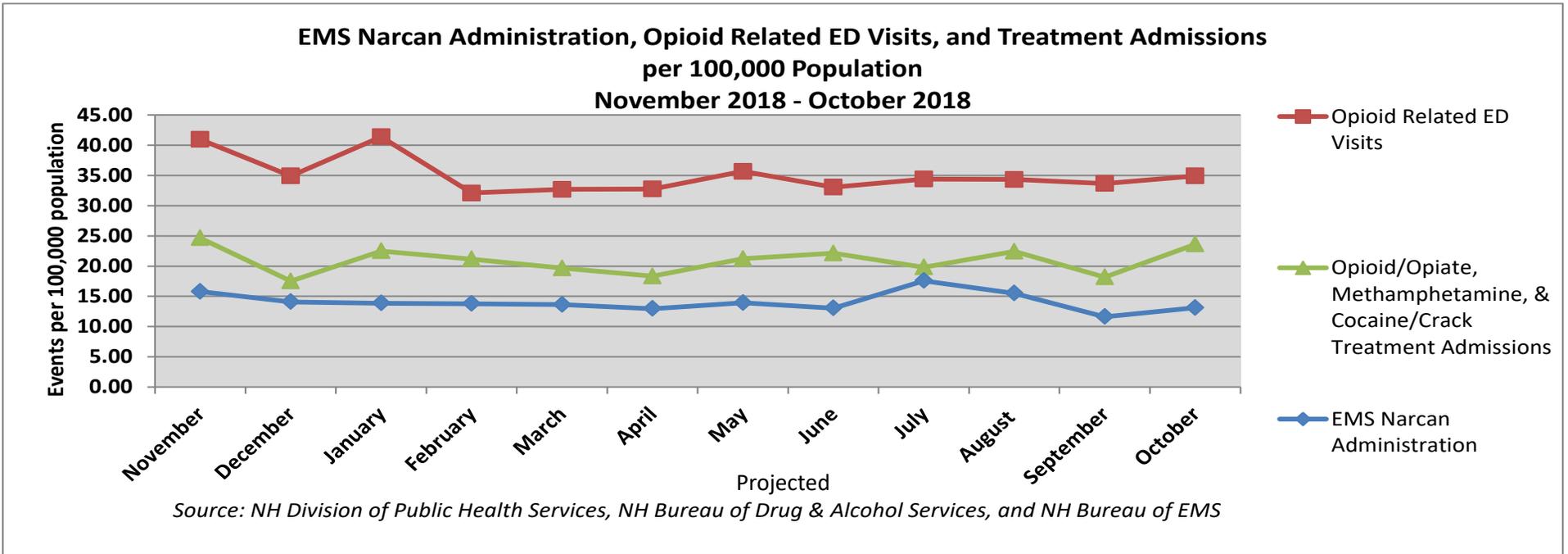
Drug Environment Report—UNCLASSIFIED

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

- ⇒ 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 death data was last **fully** updated on **12 October 2018**

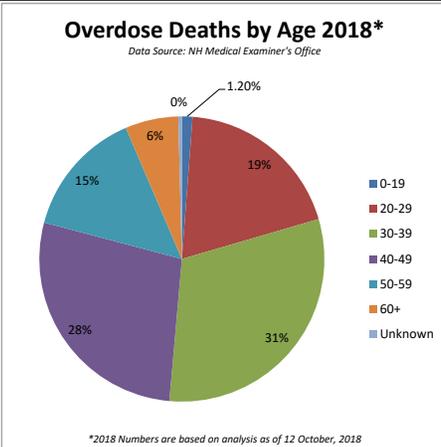
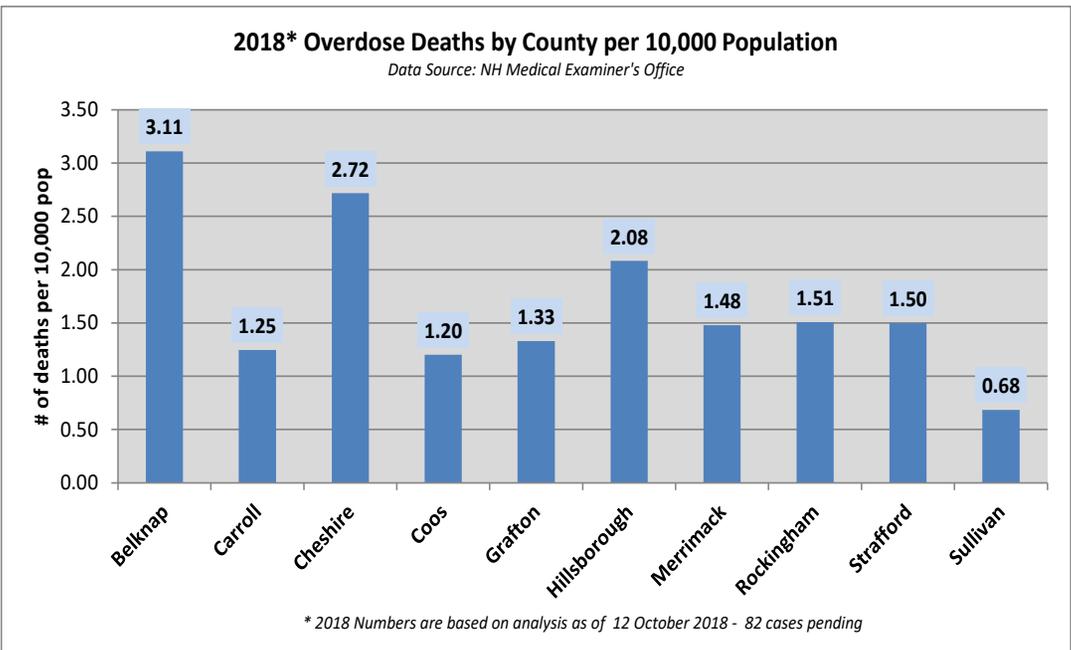
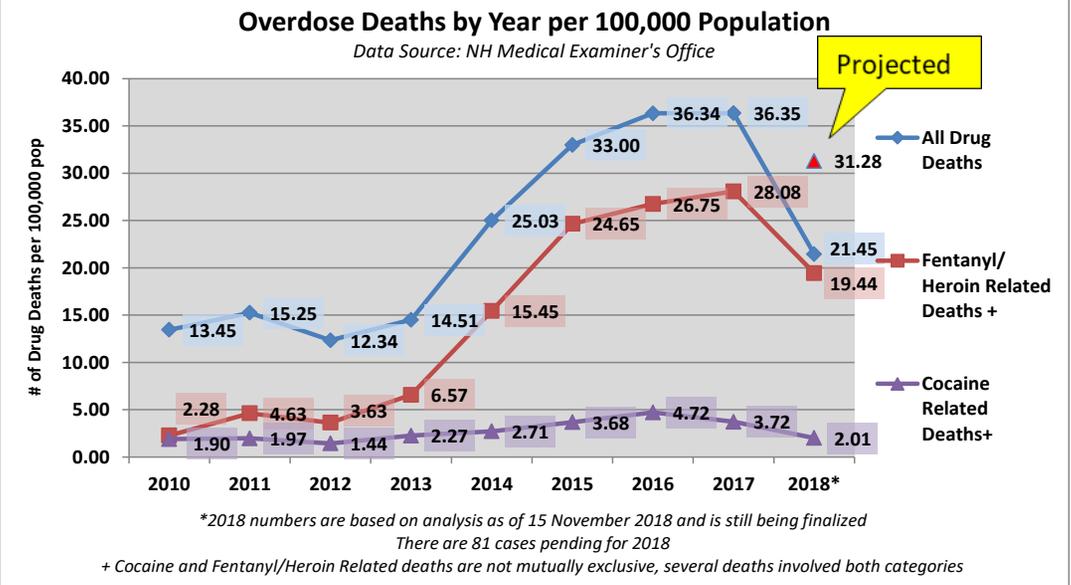
Drug Overdose Deaths:
Data Source: NH Medical Examiner's Office

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

Trends:

- At this time, there are 288 total, confirmed drug overdose deaths and 81 cases pending toxicology for 2018. The Office of the Chief Medical Examiner has projected a total of 420 drug overdose deaths for 2018.
- In 2018 thus far, Belknap County has the highest suspected drug use resulting in overdose deaths per capita at 3.11 deaths per 10,000 population.
- Cheshire County had the next highest suspected drug use resulting in overdose deaths per capita at 2.72 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 2018.

- *** IMPORTANT DATA NOTES *****
- 2018 Total numbers are based on analysis as of 15 November 2018. Age, county and drug combination information is not available with this month's update.
 - Analysis is based on county where the drug (s) is suspected to have been used.

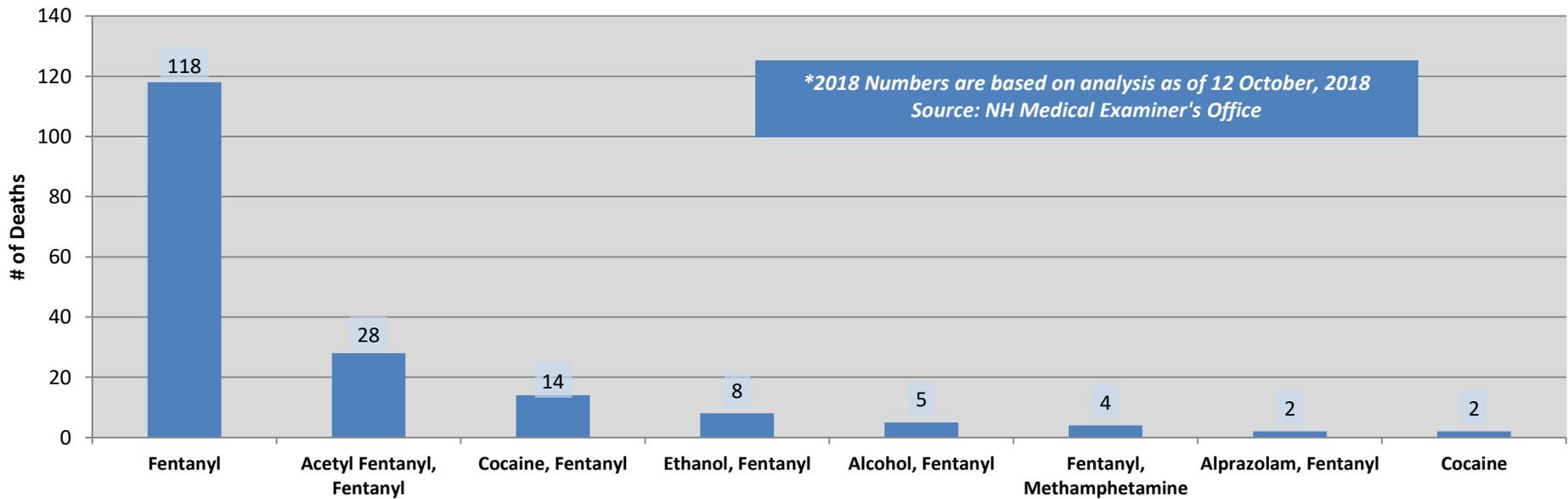


The overdose death combination data was last accurate as of 12 October 2018

Drug Overdose Deaths (Continued):

Data Source: NH Medical Examiner's Office

Cocaine and/or Fentanyl Combination Related Drug Deaths 2018*



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

4-ANPP, Acetyl Fentanyl, Fentanyl, Parafluoroisobutyrylfentanyl	Alcohol, Amphetamines, Fentanyl	Amitriptyline, Clonazepam, Diazepam, Fentanyl	Clonazepam, Cocaine, Fentanyl, Phenobarbital	Duloxetine, Ethanol, Fentanyl, Hydromorphone
Acetyl Fentanyl, Amphetamines, Clonazepam, Fentanyl	Alcohol, Chlorpheniramine, Fentanyl	Amphetamines, Buprenorphine, Fentanyl, Hydroxyzine,	Clonazepam, Fentanyl	Fentanyl, MDMA, Methamphetamine
Acetyl Fentanyl, Cocaine, Fentanyl	Alcohol, Cocaine, Fentanyl	Amphetamines, Fentanyl	Cocaine, Diazepam, Oxazepam	Fentanyl, Methamphetamine, Methylendioxyamphetamine
Acetyl Fentanyl, Diazepam, Ethanol, Fentanyl	Alcohol, Fentanyl, Quetiapine, Sertraline	Amphetamines, Fentanyl, Hydromorphone	Cocaine, Duloxetine, Fentanyl	Fentanyl, Mitragynine
Acetyl Fentanyl, Ethanol, Fentanyl	Alprazolam, Amphetamines, Cocaine, Fentanyl, Morphine	Buprenorphine, Cocaine	Cocaine, Ethanol, Diphenhydramine	Fentanyl, Morphine
Acetyl Fentanyl, Fentanyl, Methadone	Alprazolam, Buprenorphine, Fentanyl, Lorazepam, Oxycodone	Buprenorphine, Diphenhydramine, Fentanyl	Cocaine, Ethanol, Fentanyl	Fentanyl, Oxycodone
Acetyl Fentanyl, Fentanyl, Methamphetamine	Alprazolam, Cocaine, Fentanyl	Bupropion, Diazepam, Ethanol, Fentanyl	Cocaine, Fentanyl, Hydroxyzine	
Acetyl Fentanyl, Fentanyl, Mitragynine	Alprazolam, Fentanyl, Hydrocodone	Bupropion, Fentanyl, Olanzapine	Diazepam, Fentanyl, Methamphetamine	

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 October 12, 2018
 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.
 82 cases pending



Prepared by:
 NH Information & Analysis Center

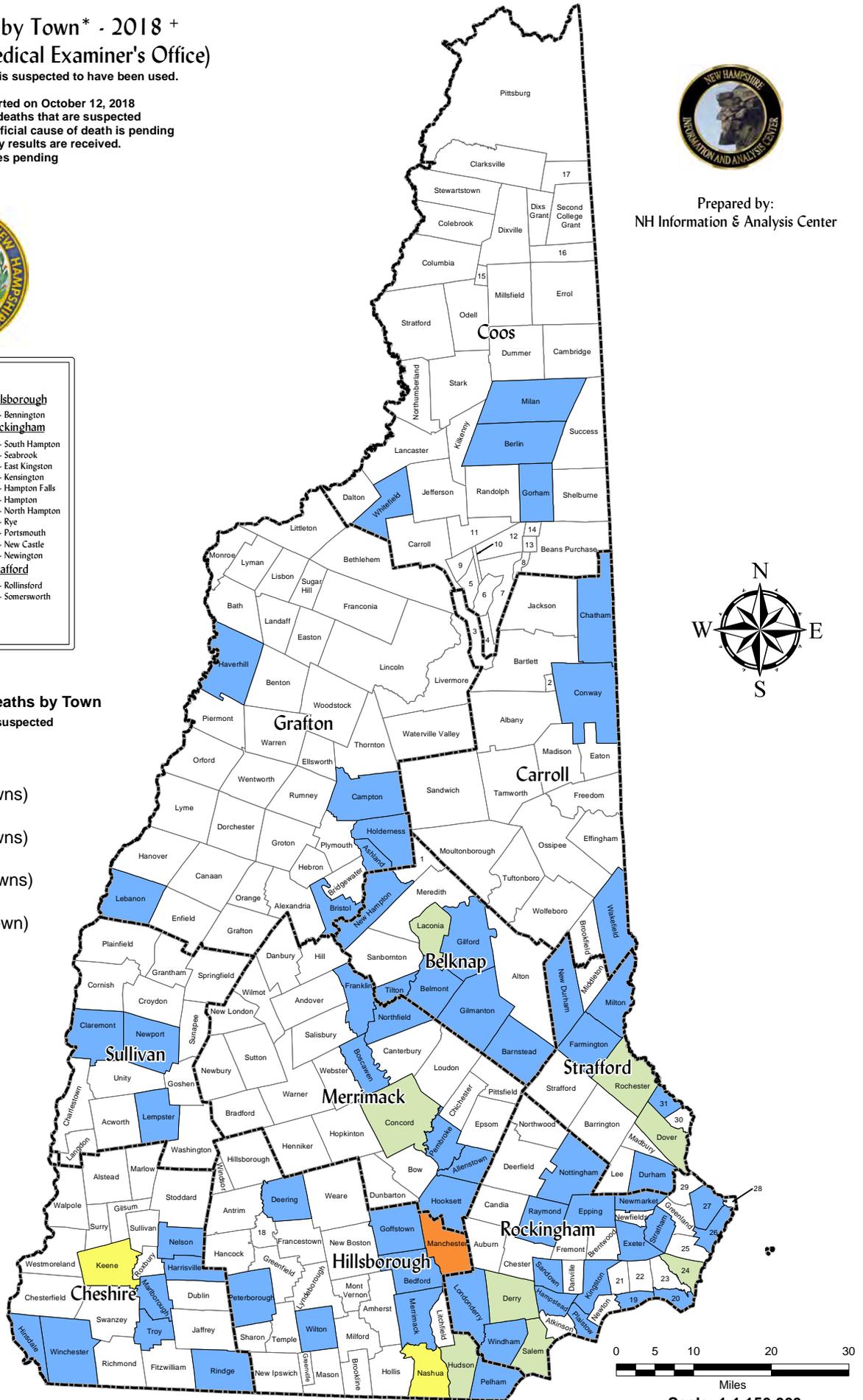


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Belknap	Hillsborough
1 - Center Harbor	18 - Bennington
Carroll	Rockingham
2 - Hales Location	19 - South Hampton
3 - Harts Location	20 - Seabrook
Coos	21 - East Kingston
4 - Hadleys Purchase	22 - Kensington
5 - Beans Grant	23 - Hampton Falls
6 - Cutts Grant	24 - Hampton
7 - Sargents Purchase	25 - North Hampton
8 - Pinkhams Grant	26 - Rye
9 - Crawford's Purchase	27 - Portsmouth
10 - Chandlers Purchase	28 - New Castle
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12 - Thompson & Meserve's Purchase	Strafford
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16 - Wentworth Location	
17 - Atkinson & Gilmanton Academy Grant	

Number of Overdose Deaths by Town

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



EMS Narcan Administration:

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

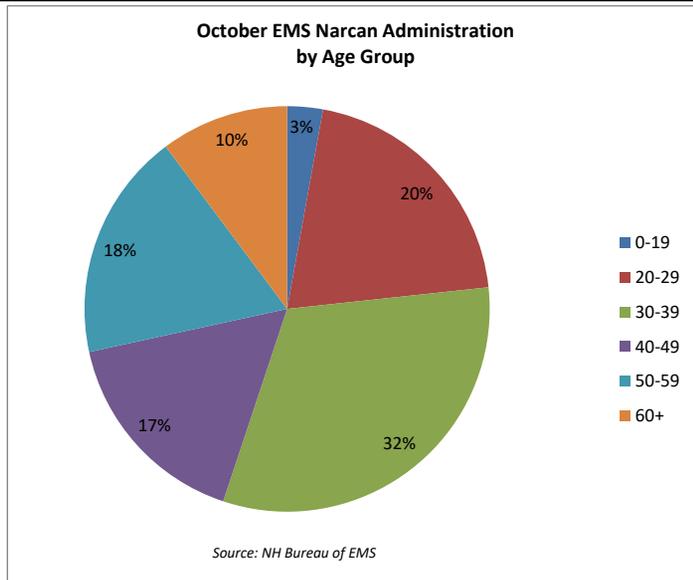
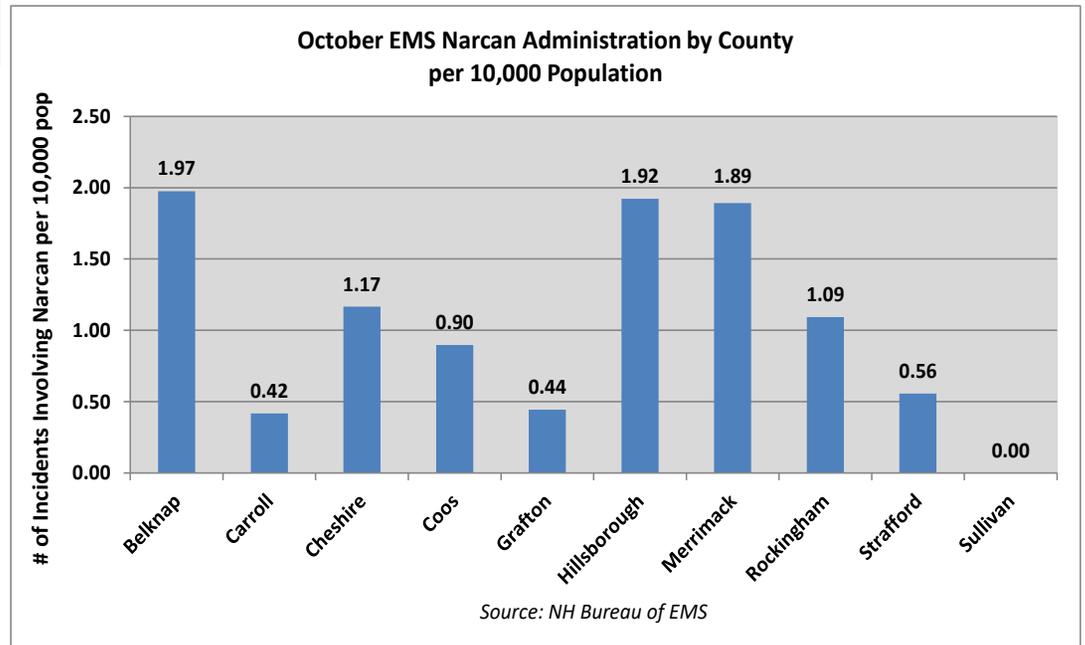
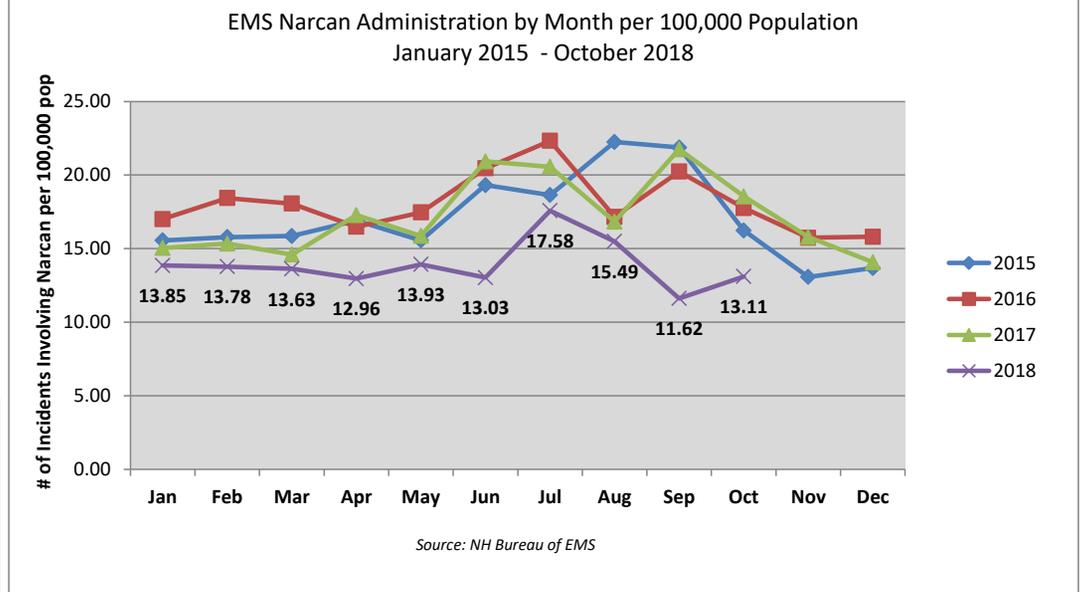
Right click on the paperclip and select "Open File" to view additional data.

Trends:

- EMS Narcan administration incidents increased by 13% from September to October.
- In October, Belknap County had the most EMS Narcan administration incidents per capita with 1.97 incidents per 10,000 population, followed closely by Hillsborough and Merrimack County with 1.92 and 1.89 incidents per 10,000 population, respectively.
- The age group with the largest number of EMS Narcan administration incidents was 30-39 which represents 32% of all EMS Narcan administration incidents for October.

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

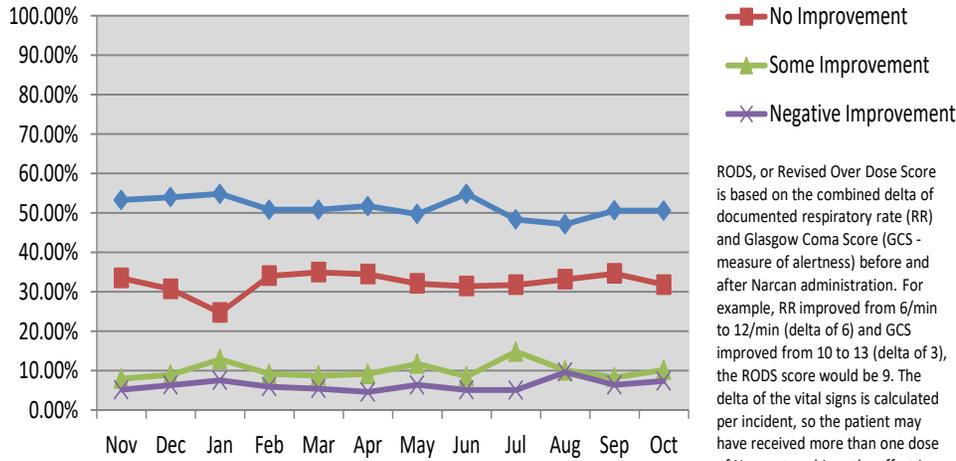
- Narcan data in this report involves the number of incidents where Narcan was administered, NOT the number of doses of Narcan during a certain time period. Multiple doses may be administered during an incident.
- Narcan is administered in cases of cardiac arrest when the cause of the arrest cannot be determined. It therefore cannot be concluded that all of the reported Narcan cases involved drugs.
- Updated Lives Saved data has been updated from June-October.



EMS Narcan Administration (Continued):

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

EMS Narcan Administration - Lives Saved %
November 2017- October 2018



Source: NH Bureau of EMS

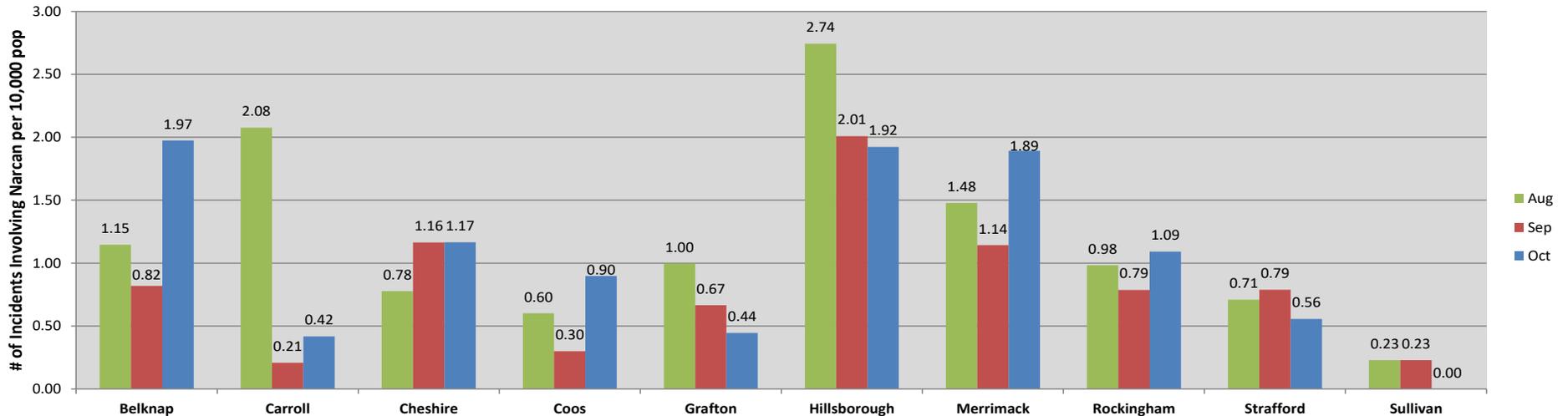
RODS, or Revised Over Dose Score is based on the combined delta of documented respiratory rate (RR) and Glasgow Coma Score (GCS - measure of alertness) before and after Narcan administration. For example, RR improved from 6/min to 12/min (delta of 6) and GCS improved from 10 to 13 (delta of 3), the RODS 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

	2017		2018									
	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct
<i>Source: NH Bureau of EMS</i>												
RODS Outcome												
Lives Saved RODS Score of 8+	113	102	102	94	93	90	93	96	114	98	79	89
Some Improvement RODS Score of 1-7	17	17	24	17	16	16	22	15	35	21	13	18
No Improvement RODS Score of 0	71	58	46	63	64	60	60	55	75	69	54	56
Negative Improvement Negative RODS Score	11	12	14	11	10	8	12	9	12	20	10	13
Total	212	189	186	185	183	174	187	175	236	208	156	176

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

EMS Narcan Administration by County per 10,000 Population



Source: NH Bureau of EMS

EMS/Narcarn Administration by Town 11/1/2017 - 10/31/2018

Data Source: New Hampshire Bureau of EMS

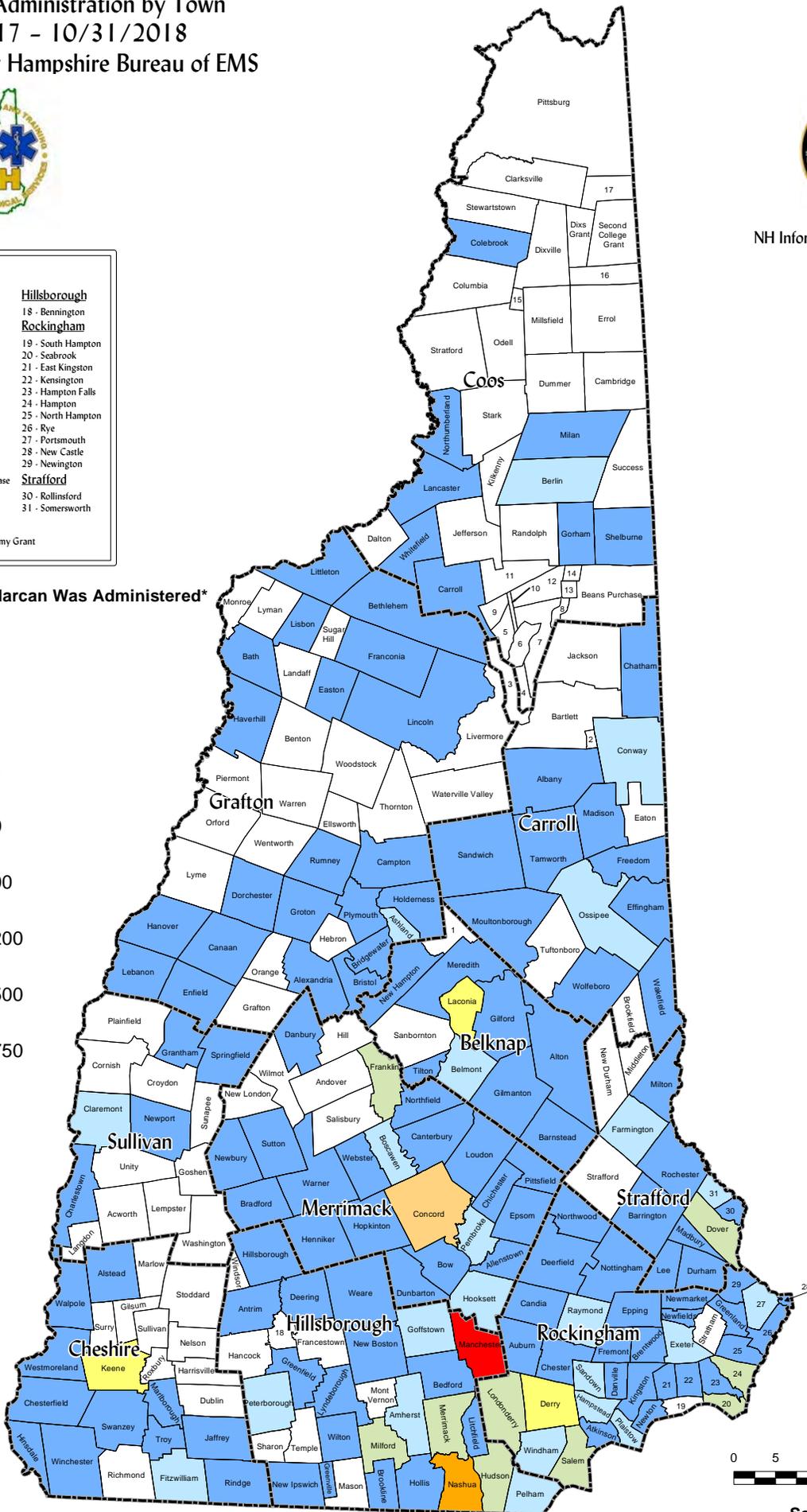
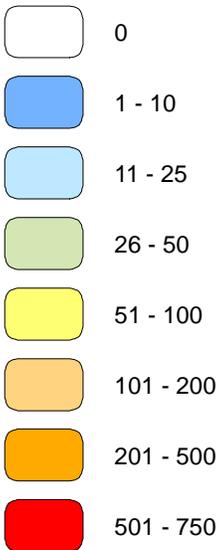


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Incidents Where Narcan Was Administered



Scale: 1:1,150,000

Opioid Related Emergency Department Visits:

Data Source: NH Division of Public Health Services

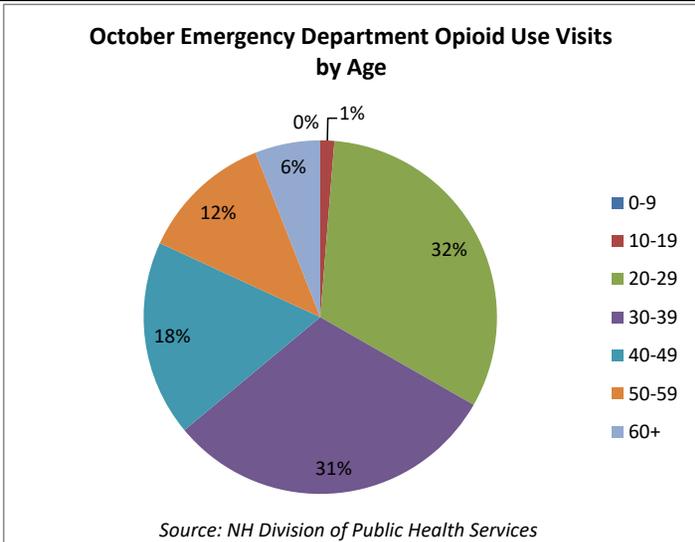
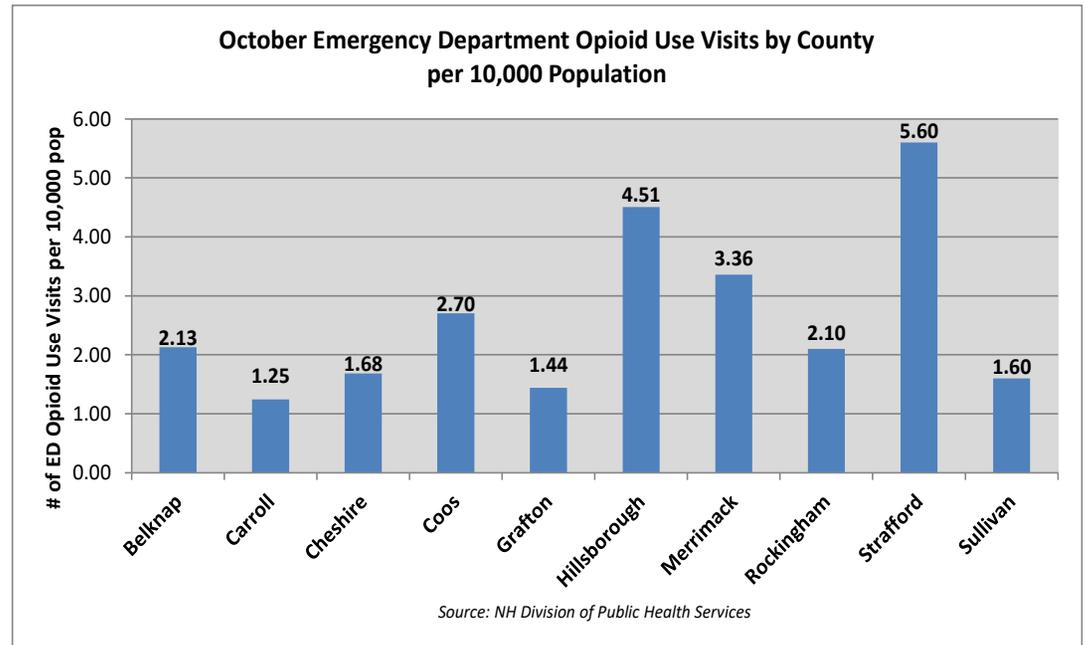
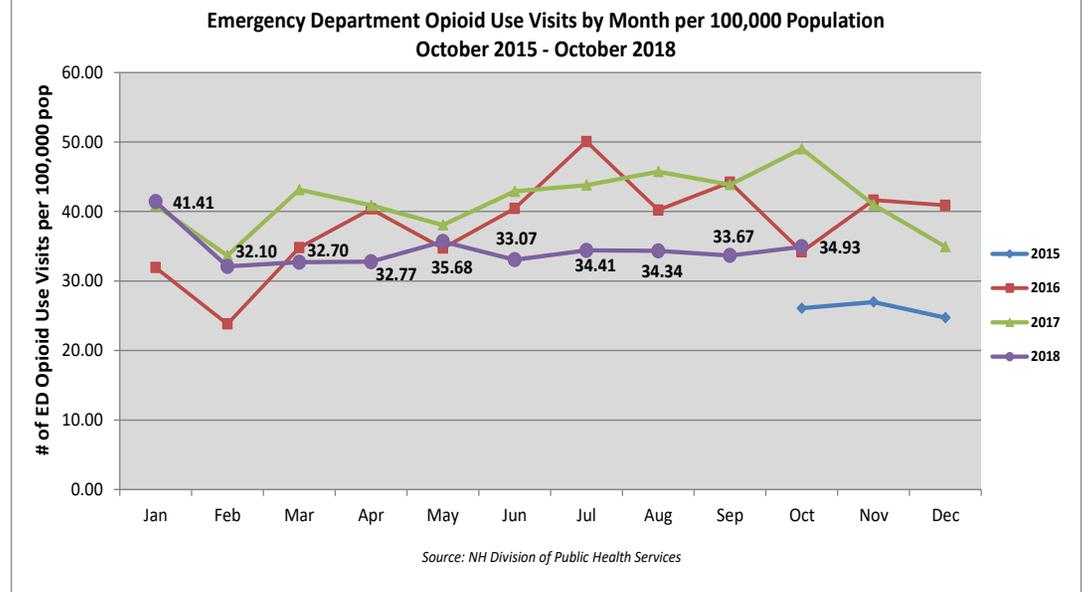
Right click on the paperclip and select "Open File" to view additional data.

Trends:

- Opioid related ED visits increased by 4% from September to October 2018.
- In October residents from Strafford County had the most opioid related ED visits per capita with 5.60 visits per 10,000 population.
- Hillsborough County residents had the second highest number of opioid related ED visits per capita with 4.51 visits per 10,000 population.
- The age group with the largest number of opioid related ED visits in October was 20-29, with 32%. The 30-39 age group had the next highest with 31%.

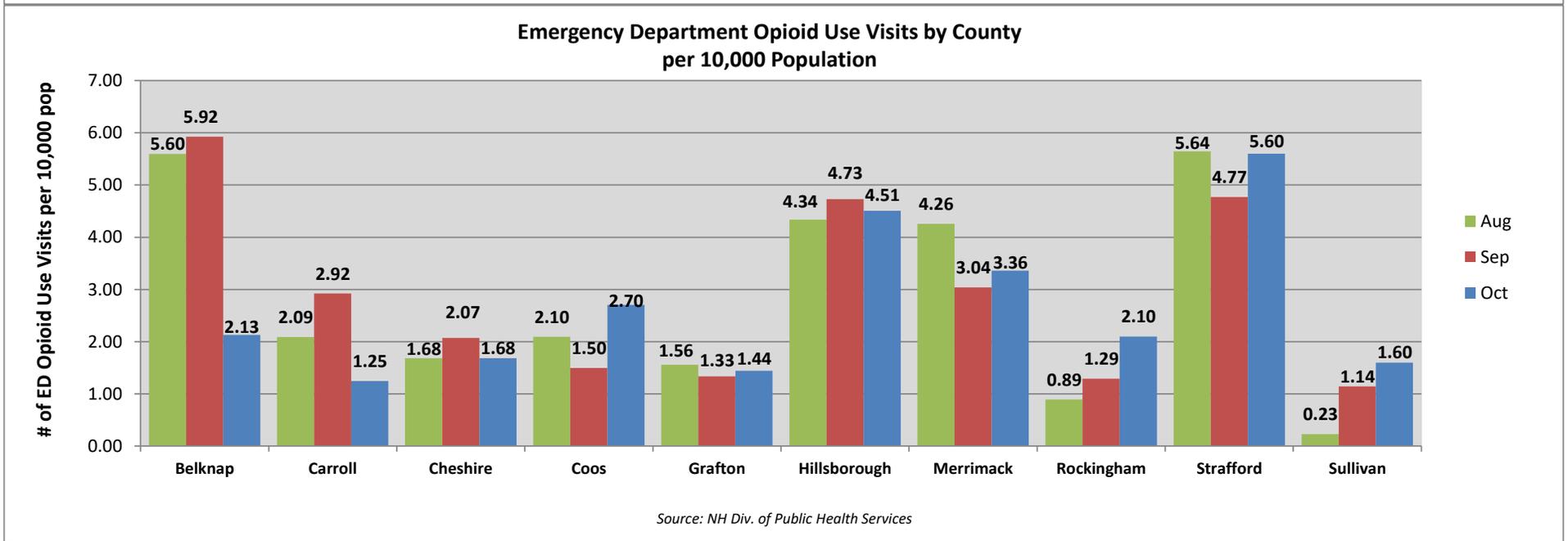
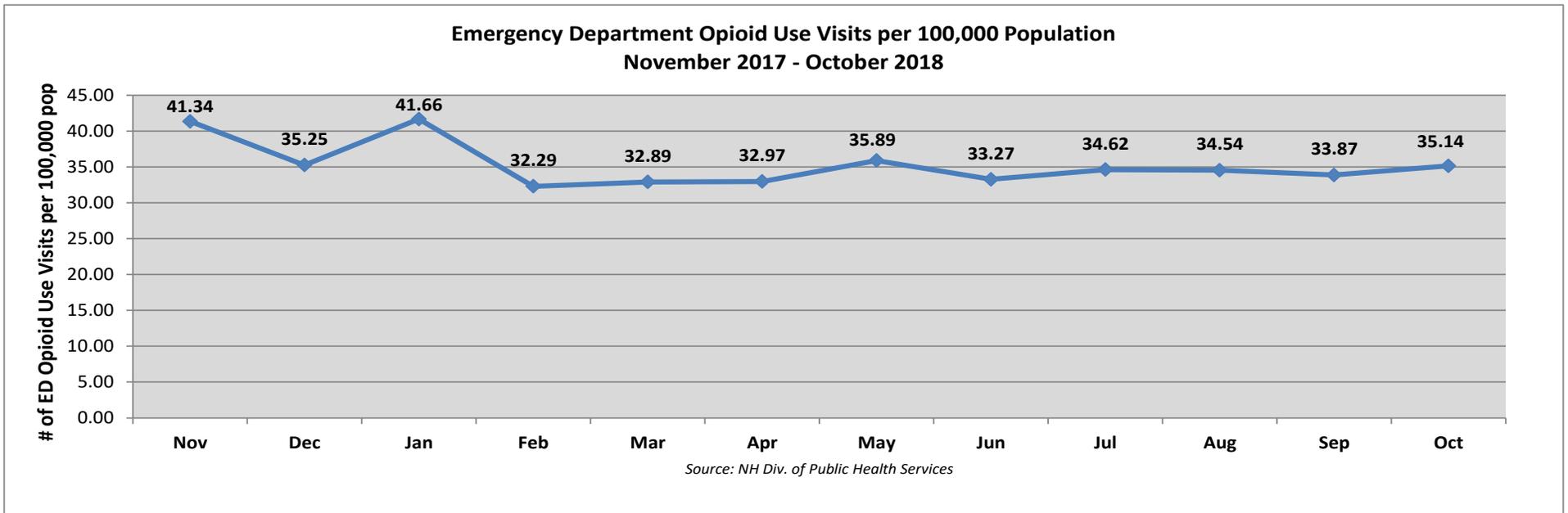
***** IMPORTANT DATA NOTES *****

- 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.



Opioid Related Emergency Department Visits (Continued):

Data Source: NH Division of Public Health Services



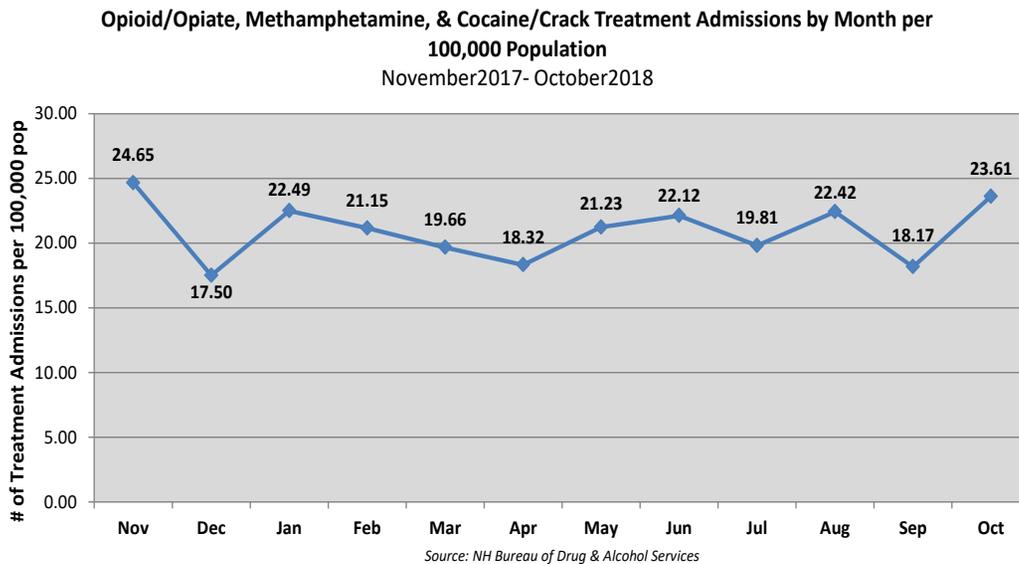
Treatment Admissions:

Data Source: NH Bureau of Drug & Alcohol Services

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

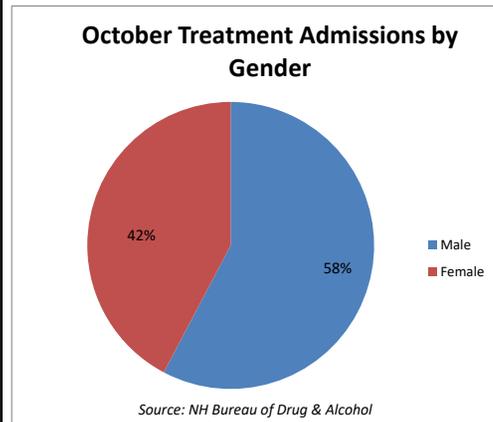
Trends:

- Opioid/opiate, Methamphetamine, & Cocaine/Crack treatment admissions increased by 30% from September to October.
- In October, residents from Strafford County were admitted most often for opioid/opiate treatment per capita with 2.29, followed by Merrimack County with 1.61 admissions per 10,000 population.
- More males than females were admitted to treatment programs in October for opioid/opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions decreased by 6% from September to October.
- Cocaine/Crack treatment admissions increased by 5% from September to October.
- Heroin/Fentanyl treatment admissions increased by 20% from September to October.

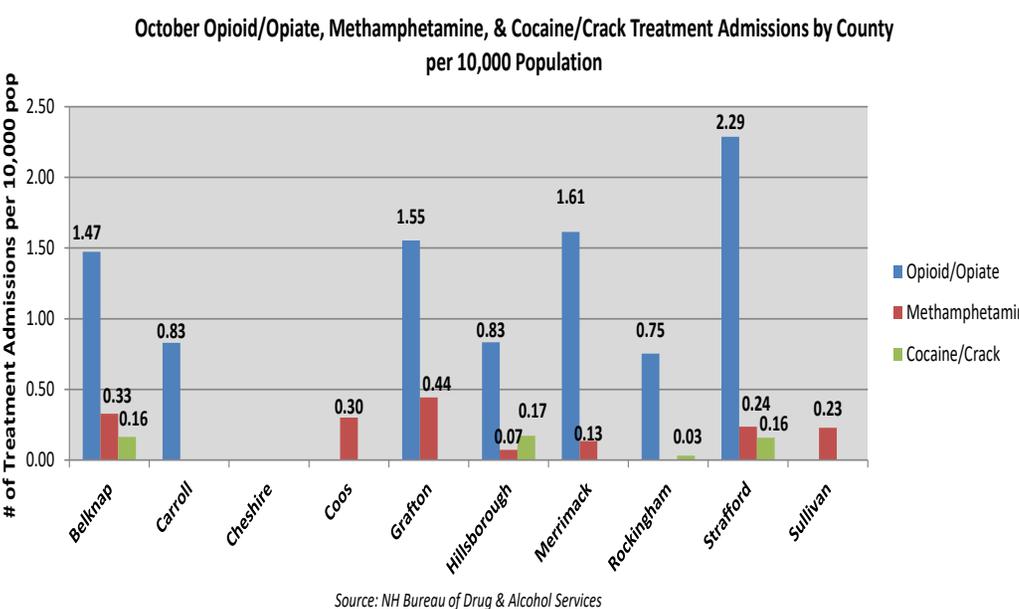


*** IMPORTANT DATA NOTES ***

- 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

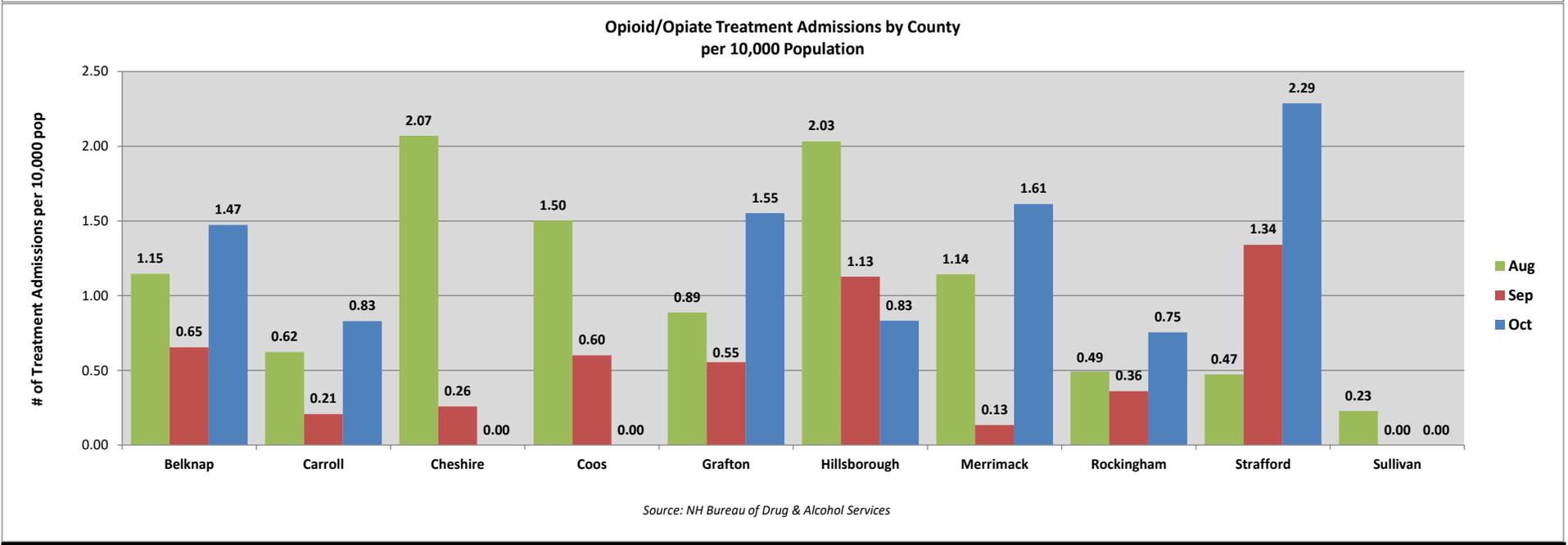
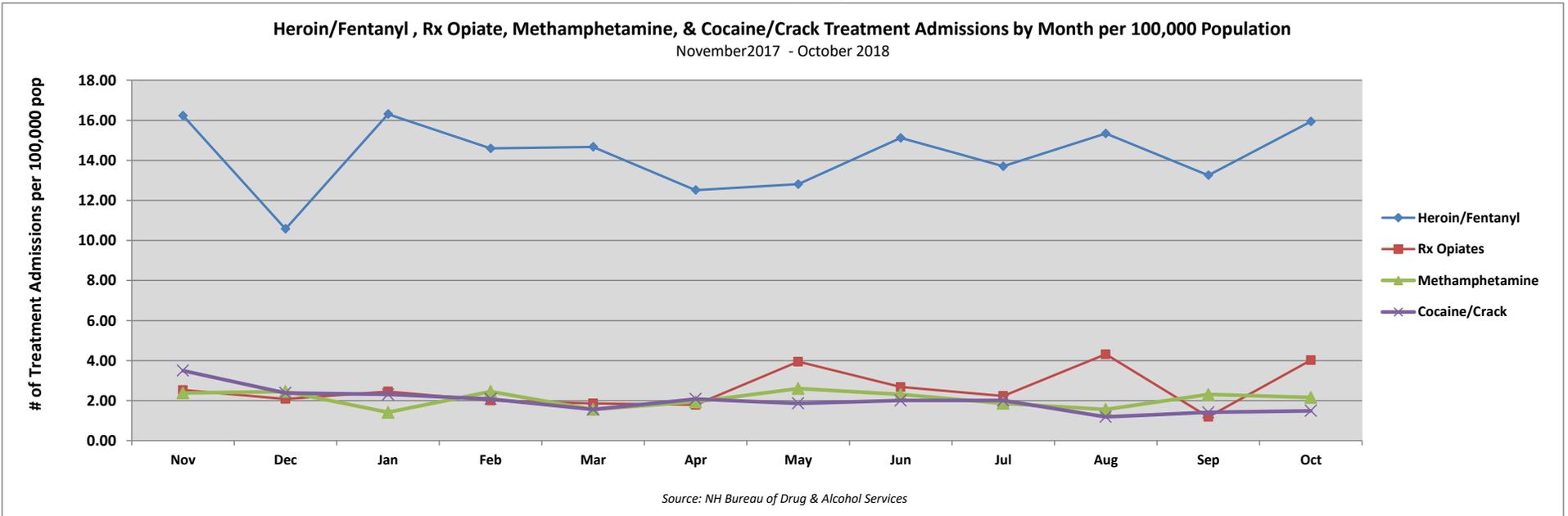


expanded its Medicaid program, which also provided increased opportunities for substance use disorder treatment in the state. Substance use disorder treatment in the state has increased sharply in response to these policies which has shifted clients served by State of New Hampshire contracted treatment providers to other payment models and facilities.



Treatment Admissions (Continued):

Data Source: NH Bureau of Drug & Alcohol Services



Situational Awareness:



Efforts Underway in Southern NH to Toughen Penalties for Opioid Drug Traffickers

Federal prosecutors in Hillsborough County have begun to toughen penalties for fentanyl traffickers as part of a nationwide program called "Operation Synthetic Opioid Surge." Attorney General Jeff Sessions announced the Surge pilot program during a stop in Concord this summer.

It targets 10 U.S. counties with high rates of opioid overdose deaths. Hillsborough County, which includes the cities of Manchester and Nashua, was selected during an application process. Surge dramatically expands the kind of case that lands in federal court, to include "readily provable" distribution of any amount of opioid. Assistant U.S. District Attorney Seth Aframe says this broader oversight means that the Hillsborough federal court is no longer just a place for big-time drug dealers.

"Now we will prosecute smaller cases," he says. "So for example, a person may ask for a ride to go pick up drugs from a source city, and on the ride back the payment is to provide their driver with some drugs. Under the Surge program, we would probably prosecute that case."

Punishment in federal court tends to be tougher than in state court.

Source: www.nhpr.org 10/23/2018

NEW HAMPSHIRE SAFE STATIONS

Manchester Safe Station Began 5/4/2016

Nashua Gateway to Recovery Began 11/17/2016

Manchester

Nashua

As of 11/21/2018

As of 11/21/2018

	Q4 2018	Total	Q4 2018	Total
Number of requests at MFD/NFR for Safe Station:	232	4,476	172	2,461
Number of participants transported to hospitals:	55	1,053	30	256
Number of participants taken to Substance Misuse Treatment Facilities:	177	3,408	140	2,180
Average length of time company "Not Available":	11.1 Min	15.3 Min	9.0 Min	10.3 Min
Number of UNIQUE participants:	207	2,742	133	1,406
Number of REPEAT participants:	112	1,882	56	1,275
Number of unique participants seen in both City's Safe Station Program	433			

Signing Opioid Law, Trump Pledges To End "Scourge" of Drug Addiction

With the nation reeling from an epidemic of drug overdose deaths, President Trump signed legislation that is aimed at helping people overcome addiction and preventing addictions before they start.

"Together we are going to end the scourge of drug addiction in America," Trump said at a White House event celebrating the signing. "We are going to end it or we are going to at least make an extremely big dent in this terrible, terrible problem."

The expansive package focuses on improving access to treatment services by lifting certain restrictions on Medicaid and Medicare coverage, as well as backing the creation of comprehensive opioid recovery centers.

It attempts to address over prescription of opioids and authorizes government research into non-addictive drugs that could be used for pain management.

Source: www.nhpr.org 10/25/2018

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 St. Suite 230 Bethlehem,
NH
Phone: 603-259-3700

CANAAN

HALO Educational Systems
44 Roberts Road Canaan, NH
Phone: 603-359-3321

CONCORD

Concord Hospital
250 Pleasant Street, Suite 5400
Concord, NH
Phone: 603-225-2711 ext. 2521

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
Ray House (Women)
14 Holy Cross Rd. Franklin, NH
Phone: 603-263-6287

Webster Place (Men)

27 Holy Cross Rd. Franklin, NH
Phone: 603-622-3020

GILFORD

Horizons Counseling Center
25 Country Club Road Suite #705
Gilford, NH
Phone: 603-524-8005

KEENE

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

LEBANON

HALO Educational Systems, LLC
1 School St. Lebanon, NH
Phone: 603-359-3321

Headrest

12 Church Street
PO Box 247 Lebanon, NH
Phone: 603-448-4872

MANCHESTER

**Families in Transition - New
Horizons**
161 South Beech St. Manchester, NH
Phone: 603-641-9441 ext. 401

Farnum Center

140 Queen City Ave.
Manchester, NH 03101
Phone: 603-622-3020

NASHUA

**Greater Nashua Council on
Alcoholism :Keystone Hall**
12 & 1/2 Amherst St. Nashua, NH
03063
Phone: 603-943-7971 Ext. 3

**Greater Nashua Open Doors
Program**

615 Amherst St. Nashua, NH
Phone: 603-881-4848

The Youth Council

112 W. Pearl St. Nashua, NH
Phone: 603-889-1090

PORTSMOUTH

Families First of the Greater Seacoast
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
Phone: 603-749-2346

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

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