

New Hampshire Drug Monitoring Initiative

New Hampshire Information & Analysis Center





NHIAC Product #: 2019-3850

August 2019 Report

16 September 2019

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

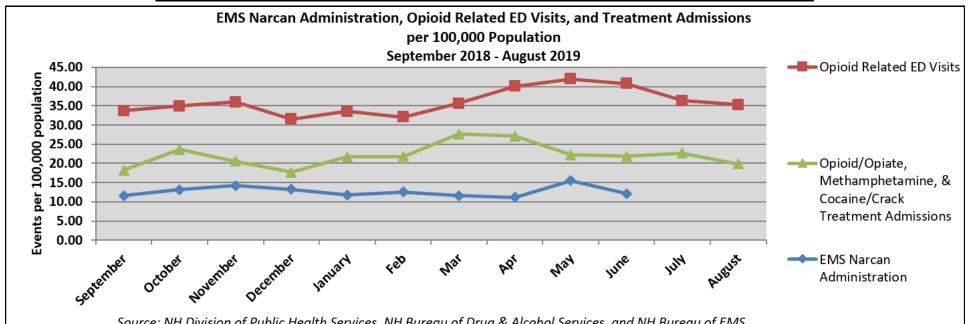
⇒ Population data source: http://www.nh.gov/osi/data-center/population-estimates.htm

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 2017 estimated population of each county.

If your agency is looking for further breakdowns than what is in this document please contact the NHIAC.

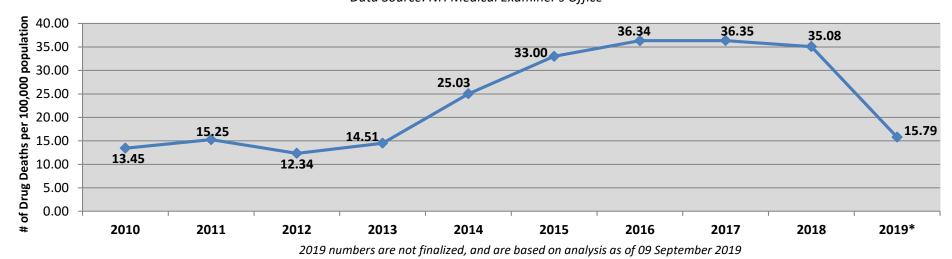
Overview: Trends for Narcan, ED Visits, Treatment Admissions, and Overdose Deaths:



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



Drug Overdose Deaths:

Data Source: NH Medical Examiner's Office

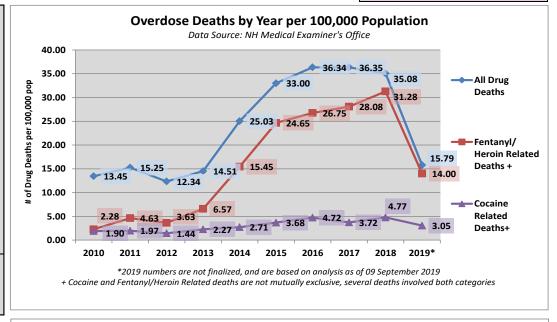
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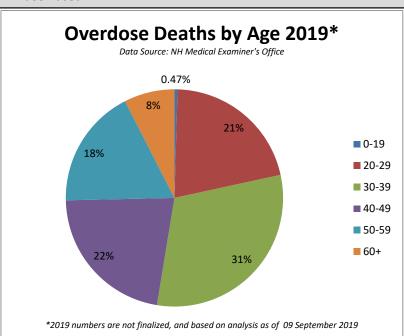
Trends:

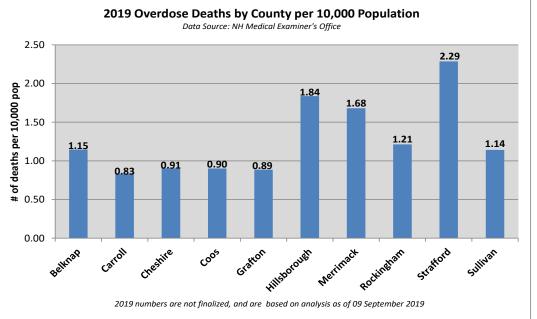
- As of 09 September there were 212 total, confirmed drug overdose deaths, and there are 56 cases pending toxicology, for 2019.
- Thus far in 2019, Strafford County continues to have the highest suspected drug use resulting in overdose deaths per capita, at 2.29 deaths per 10,000 population, while Hillsborough and Merrimack Counties are nearly tied for second, with 1.84 and 1.68 deaths per 10,000 population, respectively.
- The age group with the largest number of drug overdose deaths is 30-39 years, which represents 31% of all overdose deaths for 2019.

*** IMPORTANT DATA NOTES***

• Analysis is based on county where the drug (s) is suspected to have been used.

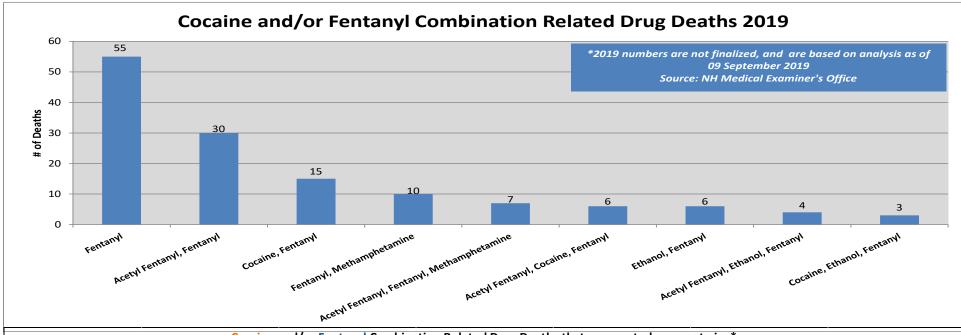




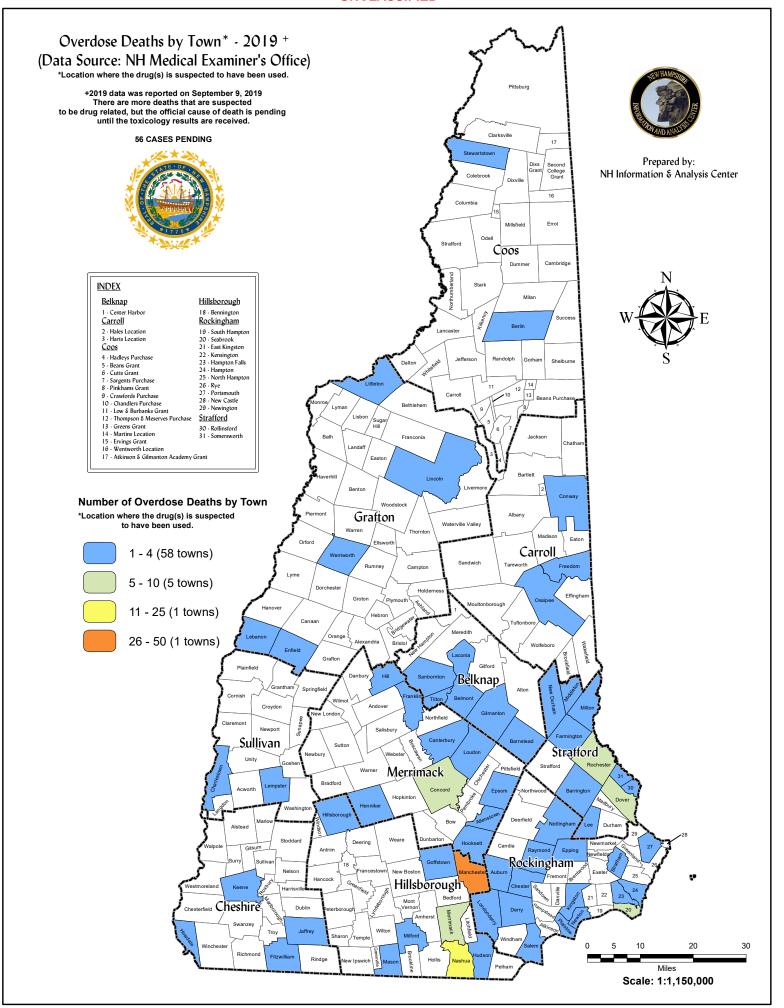


Drug Overdose Deaths (Continued):

Data Source: NH Medical Examiner's Office



Cocaine and/or Fentanyl Combination Related Drug Deaths that were noted once or twice*								
Acetyl Fentanyl, Cocaine, Fentanyl, Methamphetamine	Clonazepam, Cocaine, Fentanyl	Cocaine, Ethanol, Fentanyl, Methamphetamine	Alprazolam, Cocaine, Fentanyl	Acetyl Fentanyl, Clonazepam, Fentanyl	Acetyl Fentanyl, Fentanyl, Oxycodone	4-ANPP, Ethanol, Fentanyl		
Cocaine, Diazepam, Fentanyl	Acetyl Fentanyl, Cocaine, Ethanol, Fentanyl	Acetyl Fentanyl, Alprazolam, Amphetamines, Clonazepam, Cocaine, Diazepam, Fentanyl, Methadone	Acetyl Fentanyl, Diazepam, Ethanol, Fentanyl, Heroin, Oxycodone	Acetyl Fentanyl, Clonazepam, Fentanyl, Hydroxyzine, Mirtazapine, Nordiazepam, Risperidone, Trazodone	Diazepam, Ethanol, Fentanyl	Ethanol, Fentanyl, Oxycodone		
Ethanol, Fentanyl, Methamphetamine	Chlorpheniramine, Cocaine, Dextro/levomethorphan, Ethanol, Fentanyl, pseudoepherdrine, Tramadol	Cocaine, Fentanyl, Meprobamate	Acetyl Fentanyl, Alprazolam, Clonazepam, Fentanyl, Methamphetamine	Clonazepam, Diazepam, Fentanyl	Acetyl Fentanyl, Fentanyl, Valeryl Fentanyl	Fentanyl, Oxycodone		
Cocaine	Acetyl Fentanyl, Alprazolam, Cocaine, Ethanol, Fentanyl	Cocaine, Fentanyl, Methadone	4-ANPP, Acetyl Fentanyl, Fentanyl, Valeryl Fentanyl	Acetyl Fentanyl, Ethanol, Fentanyl, Oxycodone	Diphenhydramine, Fentanyl	4-ANPP, Acetyl Fentanyl, Fentanyl		
Acetyl Fentanyl, Fentanyl, Methadone	Cocaine, Fentanyl, Mitragynine	Alprazolam, Amphetamines, Cocaine, Fentanyl	Clonazepam, Fentanyl, Morphine	Diazepam, Fentanyl, Methamphetamine	Ethanol, Fentanyl, Heroin, Methadone	Alprazolam, Amphetamines, Fentanyl, Oxycodone		
*Cells tilled with gray indicate combinations noted twice		Alprazolam, Diphenhydramine, Fentanyl						



EMS Narcan Administration:

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

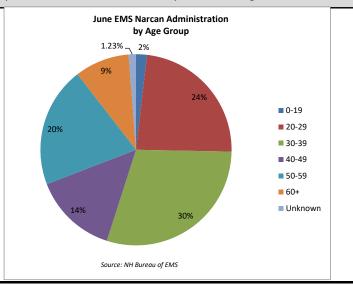
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Trends:

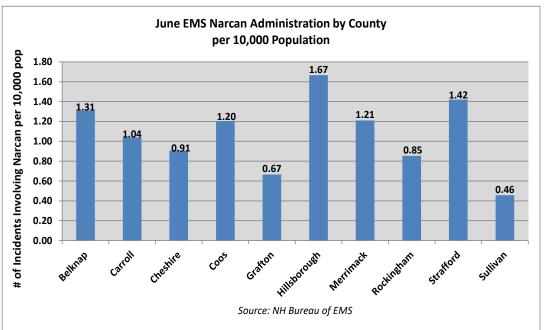
- EMS Narcan administration incider June.
- In June, Hillsborough County had to the administration incidents per capita with 1.67 incidents per 10,000 population. Strafford County was second, with 1.42 incidents per 10,000 population.
- The age group with the largest number of EMS Narcan administration incidents was 30-39, representing 30% of all EMS Narcan administrations for June.

*** 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 August, 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 <u>or</u> unknown cause. <u>Therefore, it cannot be concluded</u> that <u>all reported Narcan incidents actually involved drugs</u>.





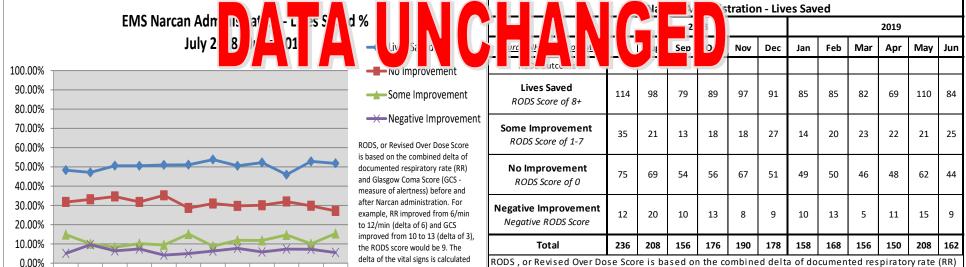


Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May June

Source: NH Bureau of EMS

EMS Narcan Administration (Continued):

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



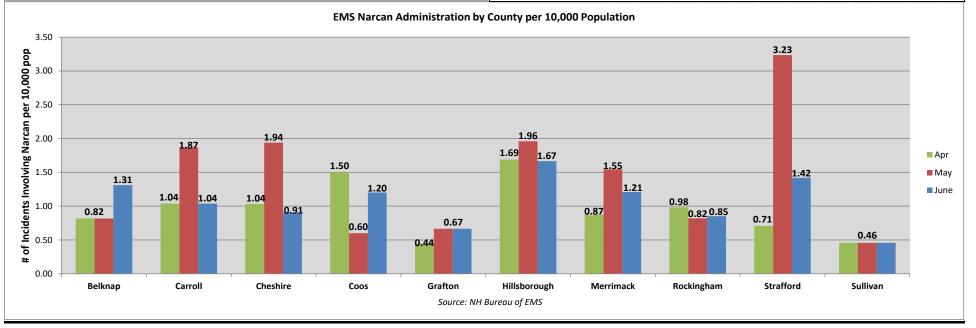
per incident, so the patient may

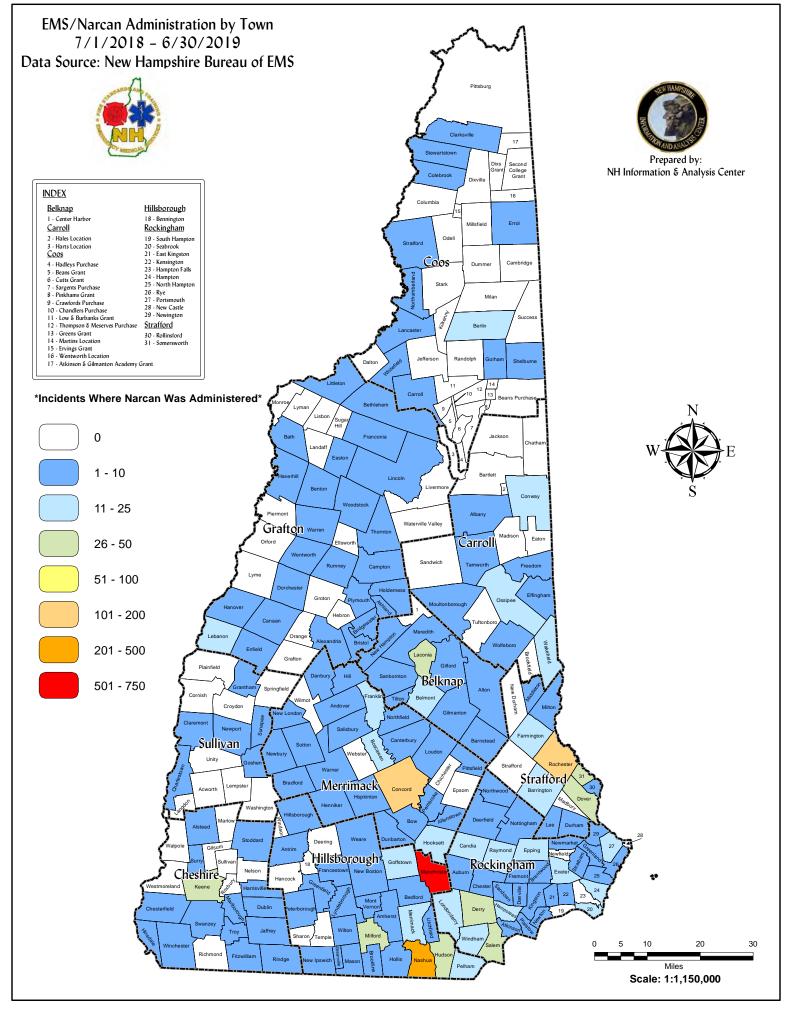
have received more than one dose

of Narcan to achieve the effect in

the RODS.

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.





Opioid Related Emergency Department Visits:

Data Source: NH Division of Public Health Services

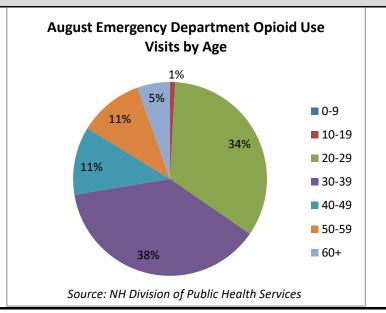
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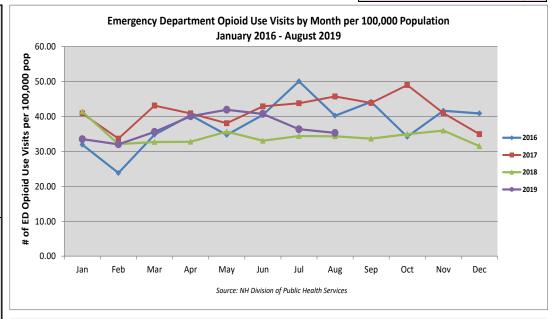
Trends:

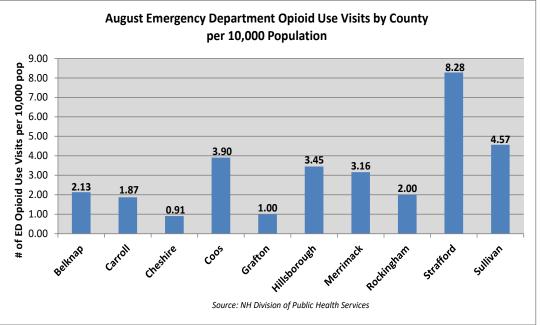
- Opioid related ED visits decreased by 3% from July to August
- In August, residents from Strafford County had the most opioid related ED visits per capita with 8.28 visits per 10,000 population.
- Sullivan County residents had the second highest number of opioid related ED visits per capita with 4.57 visits per 10,000 population.
- In August, the age group with the largest number of opioid related ED visits was 30-39 year olds, with 38%.

*** 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.

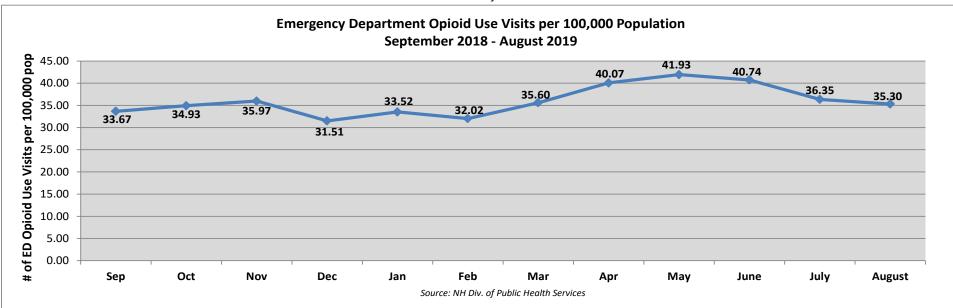


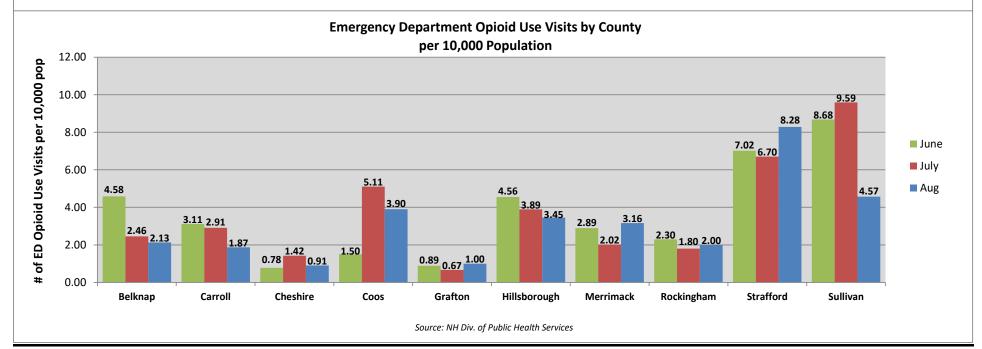




Opioid Related Emergency Department Visits (Continued):

Data Source: NH Division of Public Health Services





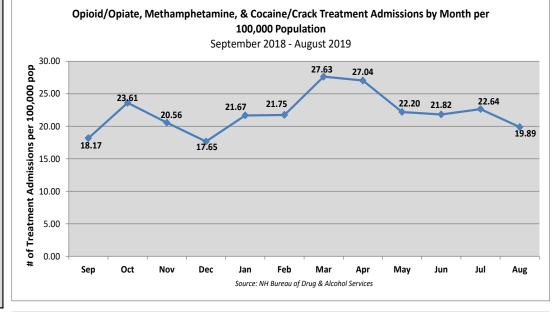
Treatment Admissions:

Data Source: NH Bureau of Drug & Alcohol Services

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

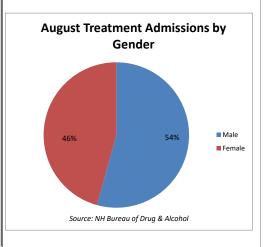
Trends:

- Opioid/opiate, Methamphetamine, & Cocaine/Crack treatment admissions decreased from July to August by 20%.
- In August, residents from Strafford County were admitted at the highest per capita rate for opioid/opiate treatment, with 1.74 admissions per 10,000 population.
- More males than females were admitted to treatment programs in August for Opioid/Opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions increased by 23% from July to August.
- Cocaine/Crack treatment admissions increased by 63% July to August.
- Heroin/Fentanyl treatment admissions decreased by 20% from July to August.

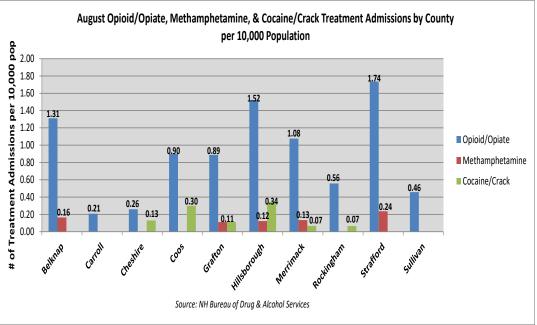


*** IMPORTANT DATA NOTES***

- 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

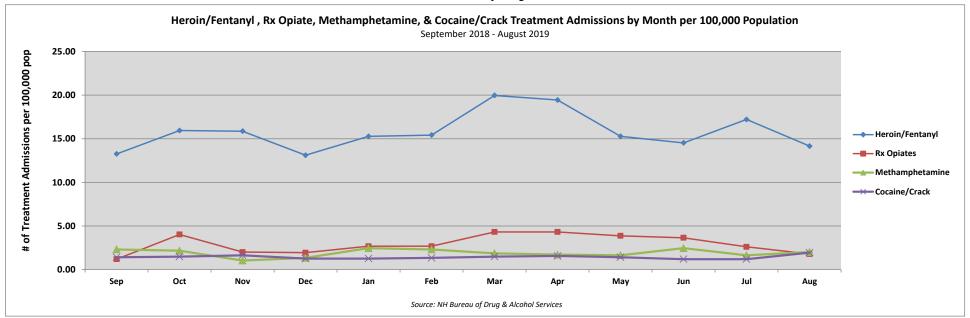


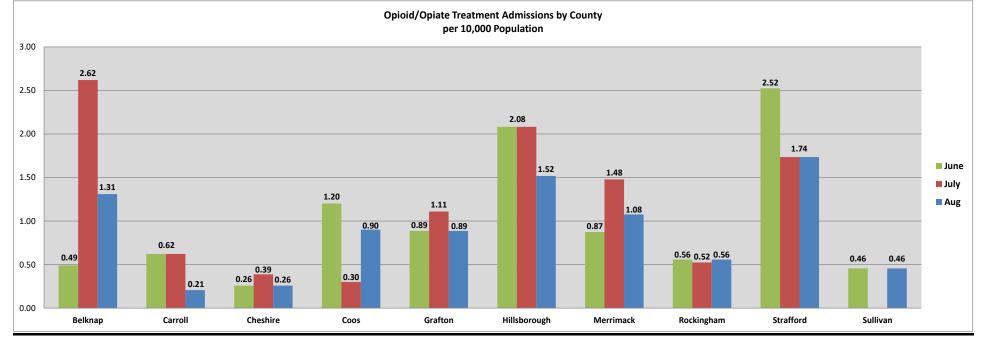
expanded its Medicaid program, which also provided increased opportunities for substance use disorder treatment in the state. Substance use disorder treatment in the state has increased sharply in response to these policies which has shifted clients served by State of New Hampshire contracted treatment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



Treatment Admissions (Continued):

Data Source: NH Bureau of Drug & Alcohol Services





Situational Awareness:



NH Rejects Tentative Settlement With Purdue Pharma Over Opioid Crisis

CONCORD, N.H. — Purdue Pharma, manufacturer of blockbuster painkiller OxyContin, has reached a tentative settlement with 22 states and more than 2,000 cities and counties that sued the company over its role in the opioid crisis of

the past two decades, people close to the deal said Wednesday. New Hampshire is not among them.

"The tentative agreement, as it stands, does not sufficiently hold the Sackler family, who bear significant responsibility for this opioid crisis, accountable," Associate Attorney General James Boffetti said in a statement. "It is a bad deal for the people of New Hampshire who have been hardest hit by the opioid crisis."

Another major concern is that the deal relies in significant measure on the assumed value of Purdue's assets and the sale of a subsidiary. States opposing it fear these values may be overestimated, and some of settlement money may never materialize. Under terms of a plan, the Sacklers would relinquish control of Stamford, Conn.-based Purdue Pharma. The deal was said to be worth \$10 billion to \$12 billion.

Source: www.unionleader.com 9/11/2019

NEW HAMPSHIRE SAFE STATIONS

Manchester

Nashua

Manchester Safe Station Began 5/4/2016

Nashua Gateway to Recovery Began 11/17/2016

As of 9/13/2019

As of 9/13/2019

	Q3 2019	Total	Q3 2019	Total
Number of requests at MFD/NFR for Safe Station:		6,138	104	3,130
Number of participants transported to hospitals:		1,390	26	390
Number of participants taken to Substance Misuse Treatment Facilities:		4,694	78	2,711
Average length of time company "Not Available":		14.3 Min	8.5 Min	10.0 Min
Number of UNIQUE participants:		3,538	90	1,739
Number of REPEAT participants:	117	2,779	40	1,711
Number of unique participants seen in both City's Safe Station Program	521			

<u>Despite Surge in Narcan, Opioid Overdose Deaths on the Rise in</u> Manchester

MANCHESTER, N.H. — Documented opioid overdoses in Manchester and Nashua are on the decline, but in Manchester, overdose deaths are increasing. New data from American Medical Response (AMR) shows a mixture of progress and struggle for those coping with opioid use disorder.

In both cities, the overall number of documented opioid overdoses is projected to be the lowest since 2016, and the number of people using Narcan before a first responder shows up at the scene of an overdose has surged. In Manchester, Narcan use has increased by nearly 75 percent since last year.

But other trends are troubling. The number of people from outside Manchester seeking help for addiction at Safe Stations is growing, despite a push by the State to open "Doorways," in every region.

Source: www.nhpr.org 9/10/2019

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

BETHLEHAM

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 Council on

Alcoholism: Keystone Hall

615 Amherst Street

Nashua, NH

Phone: 603-881-4848

Greater Nashua Mental Health

Center

110 West Pearl Street

Nashua, NH

Phone: 603-889-6147

ROCHESTER

Hope on Haven Hill

PO Box 1271

Rochester, NH 03867

Phone: 603-247-2043

A full list of Substance Use Disorder
Treatment Facilities can be found

<u>here</u>.

A treatment locator can be found

here.