# Milwaukee COPE

- <a>www.mcw.edu/MilwaukeeCOPE</a>
- <u>MKEcommunityopioid@gmail.com</u>
- <u>www.facebook.com/Milwaukeecommunityopi</u> <u>oidpreventioneffort</u>



# Informational Palm Card

# YOU'RE NOT ALONE

# **CONCERNED ABOUT SUBSTANCE USE?**

Get Help: Call 2-1-1 or 1-800-662-HELP (4357)

Get Information: MKEopioidprevention.org

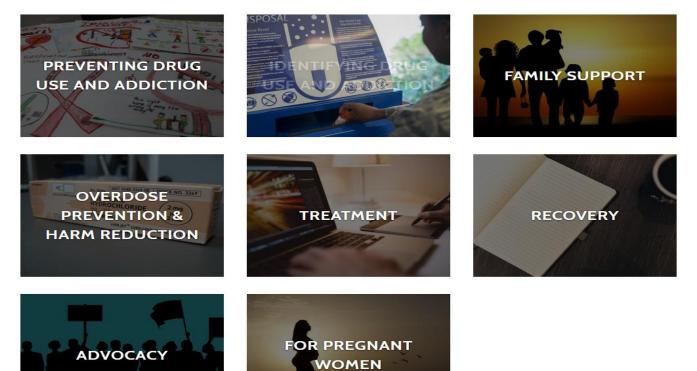
If you see an overdose, call 9-1-1

# **HELP PREVENT OVERDOSE DEATHS**

Get Free Naloxone: Call 414-225-1608

#### OPIOID OVERDOSE PREVENTION RESOURCES FOR THE MILWAUKEE COMMUNITY

#### Resources



#### OPIOID OVERDOSE PREVENTION RESOURCES FOR THE MILWAUKEE COMMUNITY

#### Treatment

For individuals who have identified drug overuse or addiction in their lives, treatment is the next step. There are many different types of treatment. Treatment is dependent on the individual, their finances, and the intensity of treatment needed. The treatment system for drug and/or mental illness can be confusing. Finding treatment options that will benefit an individual's specific situation can be difficult. Child custody or careers may prevent individuals from seeking treatment. But, there are many options available. Understanding the treatment options and identifying local programs are steps on the road to recovery.

#### **Treatment Resources and Information:**

- Navigating the Treatment System
- Local Treatment Options
- Medically-Administered Treatment
- Family and Career Concerns While Attending Treatment

#### Navigating the Treatment System

Realizing that you or a loved one needs help for substance use can be scary and overwhelming, and chances are you have no idea where to begin. There is no one-sizefits-all answer, and it can take a fair amount of research to figure out what type of help is needed and where and how to get it.

## OPIOID OVERDOSE PREVENTION RESOURCES FOR THE MILWAUKEE COMMUNITY

### **Overdose Prevention & Harm Reduction**

#### **Overdose Prevention**

#### How to Give Naloxone

Understanding Naloxone

Information on How to Administer Naloxone

NARCAN Nasal Spray Quick Start Guide

Administering Naloxone in an Overdose Response

Comprehensive overdose prevention, recognition and response, including intramuscular and intranasal naloxone rescue kit demonstrations

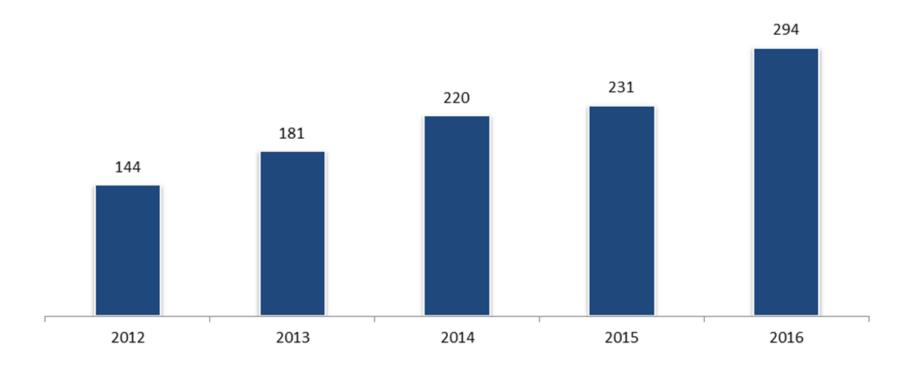


# Milwaukee County Opioid-Related Overdose Report

# 2012-2016

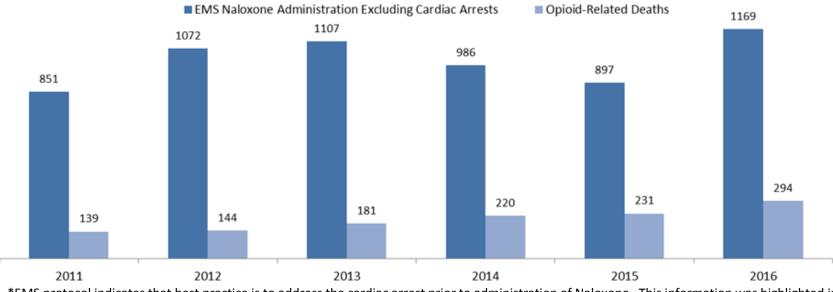
E. Brooke Lerner, PhD Jillian Theobald, MD, PhD Nicole Fumo, MPH Brenna Smith

# **Opioid-Related Overdose Deaths for Years** 2012—2016



Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths.

## Comparison of Opioid-Related Overdose Deaths and EMS Naloxone Administrations for Years 2011—2016



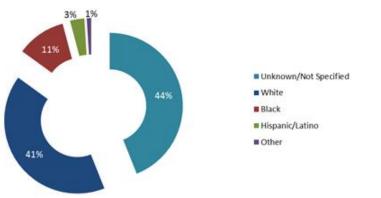
\*EMS protocol indicates that best practice is to address the cardiac arrest prior to administration of Naloxone. This information was highlighted in a 2014 EMS refresher. Therefore, all cardiac arrest cases were removed to maintain an equal comparison.

Over time, EMS Naloxone administrations have stayed relatively steady while overdose deaths continue to climb.

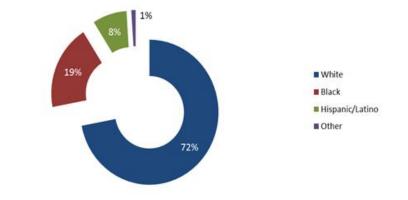
Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths. Data Source: Milwaukee County Office of Emergency Management's (OEM) Countywide EMS Medical Record Database

## Comparison of 2016 Medical Examiner and Milwaukee County EMS Data by Race/Ethnicity and Sex

EMS Response for Suspected Opioid Overdose based on Naloxone Administration by Race/Ethnicity

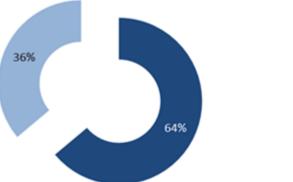


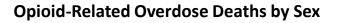
#### **Opioid-Related Overdose Deaths by Race/Ethnicity**

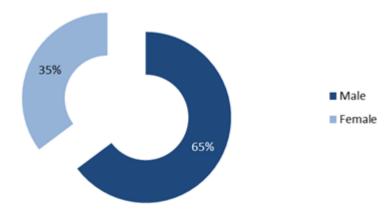


While there were a large number of cases with unknown/not documented races among EMS response data, the percent among those that were known (N=743) were consistent with race ratios of overdose deaths. When unknown cases were removed, the distribution was: White: 73%, Black: 19%, Hispanic/Latino: 6%.









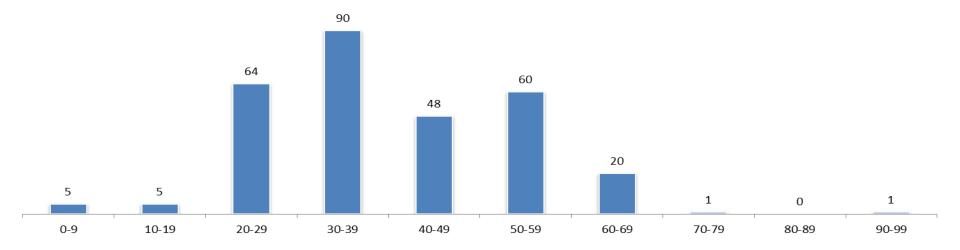
Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths.

Data Source: Milwaukee County Office of Emergency Management's (OEM) Countywide EMS Medical Record Database

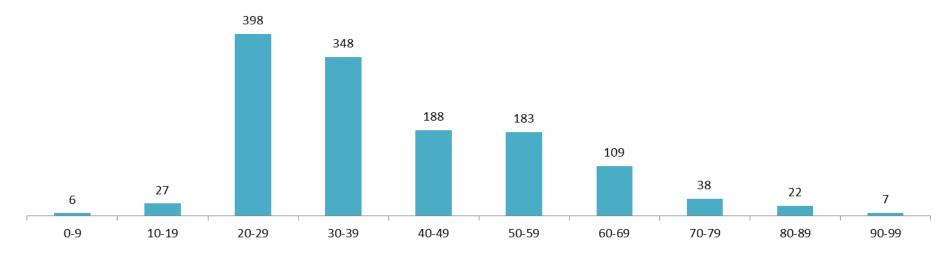
Male

Female

### Comparison of 2016 Medical Examiner and Milwaukee County EMS Data by Age Range Opioid-Related Overdose Deaths by Age Range



#### EMS Responses for Suspected Opioid-Related Overdose Based on Naloxone Administration by Age Range



In 2016, 22% of opioid-related overdose deaths occurred among victims 20-29 years of age compared to 30% of EMS responses for suspected opioid-related overdose for the same age range.

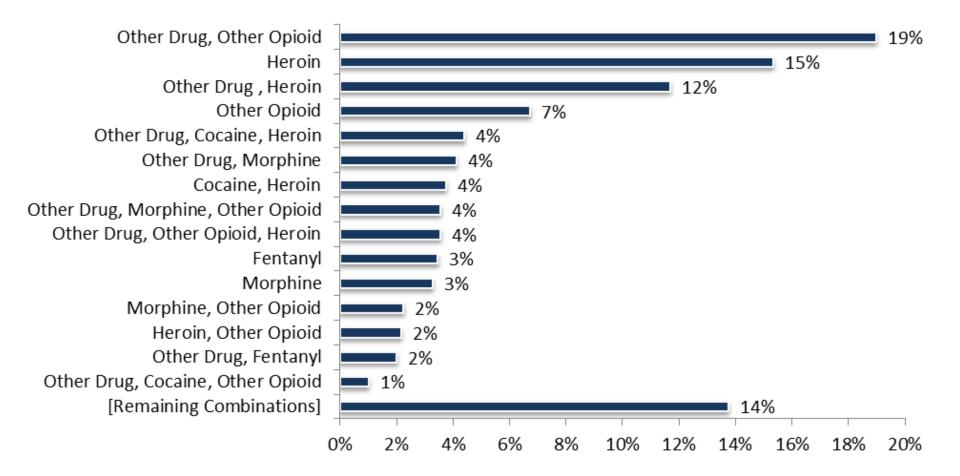
Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths. Data Source: Milwaukee County Office of Emergency Management's (OEM) Countywide EMS Medical Record Database

## Percent of Opioid-Related Overdose Deaths Occurring at the Victims' Residence in Milwaukee County for Years 2012—2016

| Year                | 2012 | 2013 | 2014 | 2015 | 2016 |
|---------------------|------|------|------|------|------|
| Death at residence  | 106  | 131  | 150  | 162  | 190  |
| Total opioid deaths | 144  | 181  | 220  | 231  | 294  |
| Percent             | 74%  | 72%  | 68%  | 70%  | 65%  |

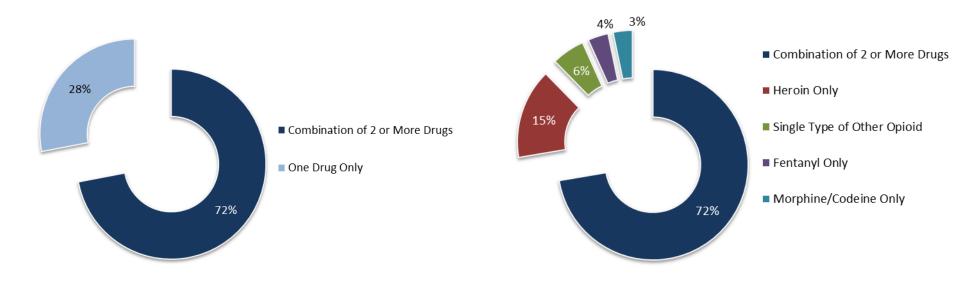
From 2012 through 2016, 69% of people who experienced a fatal opioid-related overdose died in their place of residence. 14 cases did not have a place of residence recorded.

## Fifteen Most Common Drug Combinations Attributed to Cause of Death Based on Toxicology Results for Years 2012—2016



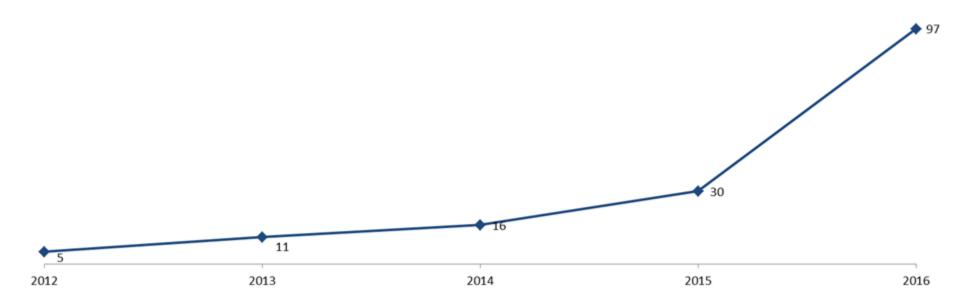
Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths.

# Number of Cases with a Single Drug Attributed to the Cause of Death Compared to Those with a Combination of Two or More Drugs for Years 2012—2016



Of the 1070 opioid-related overdose deaths from 2012-2016, 774 (72%) died from a combination of 2 or more drugs. Note: Single Type of Other Opioid: includes victims who died with <u>only one</u> opioid in their system: Buprenorphine, Hydrocodone, Hydromorphone, Loperamide, Methadone, Oxycodone, Oxymorphone, or Tramadol.

### Overdose Deaths Where Fentanyl was Attributed as a Cause of Death Alone or In Combination with Other Drugs for Years 2012—2016



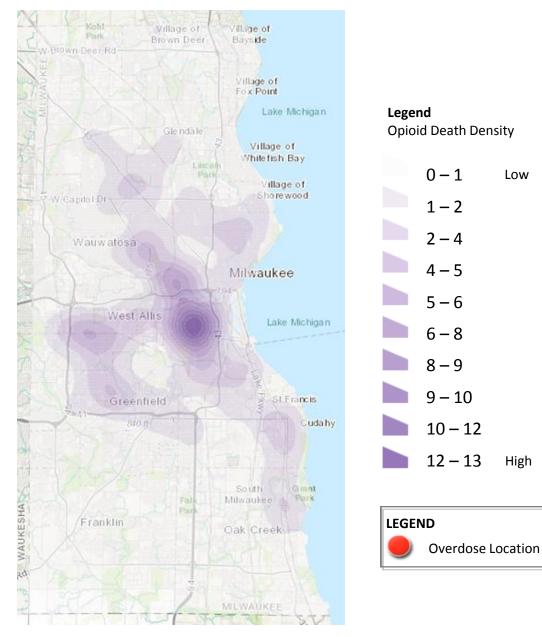
Of the 294 opioid-related overdose deaths in 2016, 33% involved the drug fentanyl. In 2015, only 13% of opioid-related overdose deaths involved fentanyl.

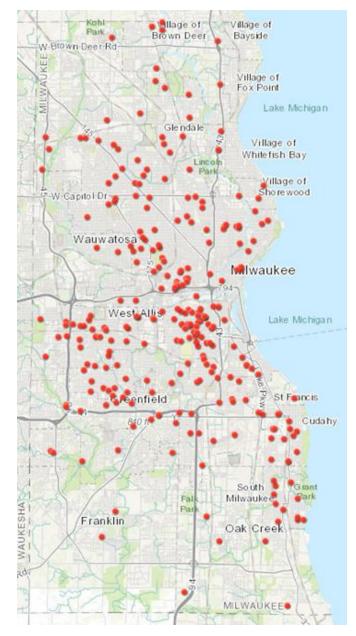
Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths.

#### **Overdose Location for Opioid-Related Deaths in Milwaukee County for Year 2016**

Low

High

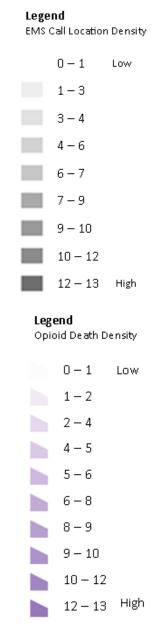




Data Source: Milwaukee County Medical Examiner – Opioid-related overdose deaths.

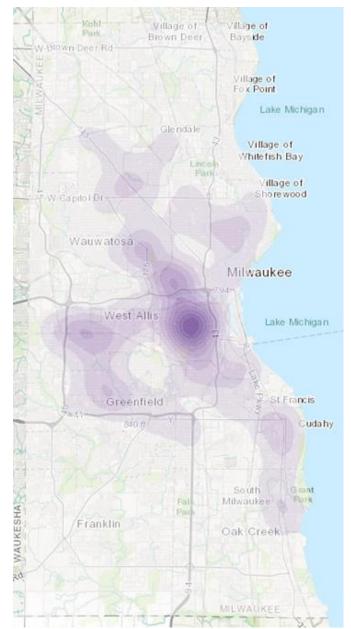
#### Location of EMS Responses for Suspected Opioid-Related Overdose Based on Naloxone Administration for Year 2016

#### Village of Village of Bayside W-Brown Deer Rd Village of Fox Point Lake Michigan Glendale Village of White fish Bay Shore wood Wauwatosa Milwaukee West Allis Lake Michigan St Francis Greenfield Cudahy South Grant Milwaukee Bark & WAUKESHA Franklin Oak Creek MILWAUKE



#### **Overdose Location for Opioid-Related Deaths**

#### in Milwaukee County for Year 2016



### Review of Medical Examiner Narratives for all 2016 Opioid-Related Overdose Deaths: Circumstances Surrounding the Overdose That May Have Contributed to Death

|  | Number of Cases with<br>The Factor | Percent of all Deaths (N=294) | Percent of Total Cases With the Factor<br>Documented that Were Positive for the Factor* |
|--|------------------------------------|-------------------------------|---|
| Resuscitation attempted prior to declaring death<br>(documented=294, 100%) | 123                                | 42%                           | 42%   |
| Victim transported to the hospital<br>(documented=294, 100%)               | 43                                 | 15%                           | 15%   |
| Victim transported to the hospital by EMS                                  | 31                                 | 11%                           | 72%   |
| Received Naloxone during resuscitation<br>(documented=252, 86%)            | 32                                 | 11%                           | 43%   |
| By EMS   | 20                                 | 7%                            | 63%   |
| By bystander   | 7                                  | 2%                            | 22%   |
| By hospital provider   | 3                                  | 1%                            | 9%  |
| By Police  | 2                                  | <1%                           | 6%  |
| Drug paraphernalia visible at the time of resuscitation (documented=70)    | 54                                 | 18%                           | 77%   |
| Victim alone at the time of overdose<br>(documented=261, 89%)              | 188                                | 64%                           | 72%   |
| Victim not alone at the time of overdose                                   | 73                                 | 25%                           | 28%   |
| Victim thought to be sleeping at the time of death                         | 28                                 | 10%                           | 38%   |
| Location of overdose<br>(documented=294, 100%)                             |                                    |                               |   |
| Home/Residence   | 247                                | 84%                           | 84%   |
| In a Vehicle   | 15                                 | 5%                            | 5%  |
| Outside  | 10                                 | 3%                            | 3%  |
| Public Building  | 10                                 | 3%                            | 3%  |
| Hotel/Motel  | 5                                  | 2%                            | 2%  |
| Physician Office/Clinic/Hospital   | 3                                  | 1%                            | 1%  |
| Unknown  | 4                                  | 1%                            | 1%  |

\*Note: This data was abstracted from unstructured narratives. Not all variables were documented in every case. When not all cases have a variable documented it may or may not mean that the factor was not present for that case. Therefore the percent of cases for a given factor is given for all deaths in 2016 and for all cases with the factor documented.

## Review of Medical Examiner Narratives for all 2016 Opioid-Related Overdose Deaths: Victims' Documented Medical History Prior to Death

|  | Number of Cases with The Factor | Percent of all Deaths (N=294) | Percent of Total Cases With the Factor<br>Documented that Were Positive for the Factor* |
|--|---------------------------------|-------------------------------|---|
| History of tobacco use<br>(documented=225, 77%)  | 188                             | 64%                           | 84%   |
| History of substance use<br>(documented=228, 78%)  | 282                             | 96%                           | 98%   |
| Alcohol  | 171                             | 58%                           | 61%   |
| Heroin   | 158                             | 54%                           | 56%   |
| Prescription Other   | 109                             | 37%                           | 39%   |
| Other  | 103                             | 35%                           | 37%   |
| Prescription Opioids   | 101                             | 34%                           | 36%   |
| Cocaine  | 85                              | 29%                           | 30%   |
| Benzodiazepines  | 75                              | 26%                           | 27%   |
| Marijuana  | 57                              | 19%                           | 20%   |
| Unknown  | 23                              | 8%                            | 8%  |
| Methamphetamines   | 7                               | 2%                            | 2%  |
| History of previous overdose<br>(documented=76, 26%)                                     | 50                              | 17%                           | 66%   |
| History of substance use disorder treatment or<br>rehabilitation<br>(documented=73, 25%) | 71                              | 24%                           | 97%   |
| History of pain management<br>(documented=53, 18%)                                       | 49                              | 17%                           | 92%   |

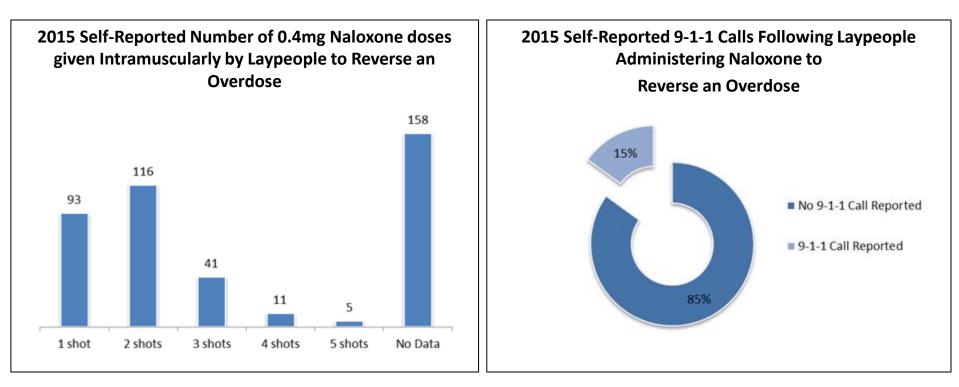
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## EMS Transport Destination for Suspected Opioid-Related Overdose Victims Who Received Naloxone for Years 2012—2016

| Transport Destination         | Number of calls<br>(N=3,519) |  |  |
|-------------------------------|------------------------------|--|--|
| Hospital Emergency Department | 3,156 (90%)                  |  |  |
| Medical Examiner              | 161 (4.6%)                   |  |  |
| Refused Transport             | 190 (5.4%)                   |  |  |
| Other/Unknown                 | 12(<1%)                      |  |  |

### Laypeople Overdose Reversal Attempts Using Naloxone in Milwaukee County

In 2015, <u>424 laypeople reported using naloxone</u> to reverse an overdose. This data was collected by the AIDS Resource Center of Wisconsin (ARCW) through self-reported surveys collected by the Needle Exchange Program when replacement naloxone was requested. Within the state of Wisconsin they recorded 1,135 peer saves.

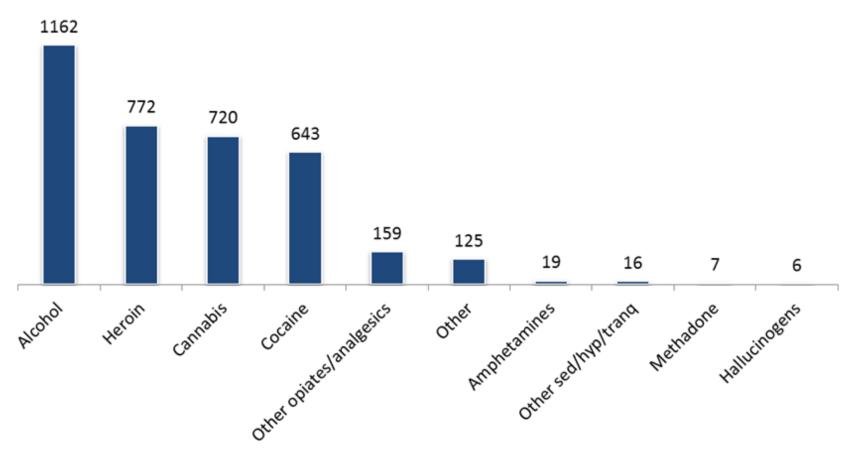


In 2016, ARCW collected self-reported data indicating 192 overdose reversal attempts. This number is significantly lower than those reported in 2015 but is considered an under-estimate. During 2016, the program was out of naloxone for approximately two months, new staff were being trained on data collection methods, and a new database was implemented. However, despite likely under-reporting, a similar proportion of individuals (12%) reported calling 9-1-1 at the time of the overdose. It is also important to note that based on additional survey questions, 6% reported taking the victim to the hospital in 2016.

Data Source: AIDS Resource Center of Wisconsin Needle Exchange Program Surveys

## 2016 Data from the Milwaukee Behavioral Health Division -Community Access to Recovery Services

3,629 individuals sought assistance with a self-reported primary substance of use Of those, 26% (n=938) reported heroin or another opioid as their primary substance of use.



Primary Substance of Use Among All Individuals Seeking Assistance in 2016

Data Source: Milwaukee County Behavioral Health Division: Community Access and Recovery Services

# Summary

- In 2016 overdose deaths continued to rise in Milwaukee County
- For every death, ~6 additional people overdose and survive
- It is unknown how many people suffer from substance use disorder
- In 2016, over 930 people whose drug of choice was heroin or an opioid requested assistance from BHD's Community Access and Recovery Services
- This epidemic touches every sector of our county and no geographic region, race, or age group is spared
- The majority fatal overdoses involve multiple kinds of drugs
- There has been a steep rise in fentanylrelated overdose deaths
- Of those who die, the majority are not identified until after it was too late to attempt resuscitation or administer Naloxone



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