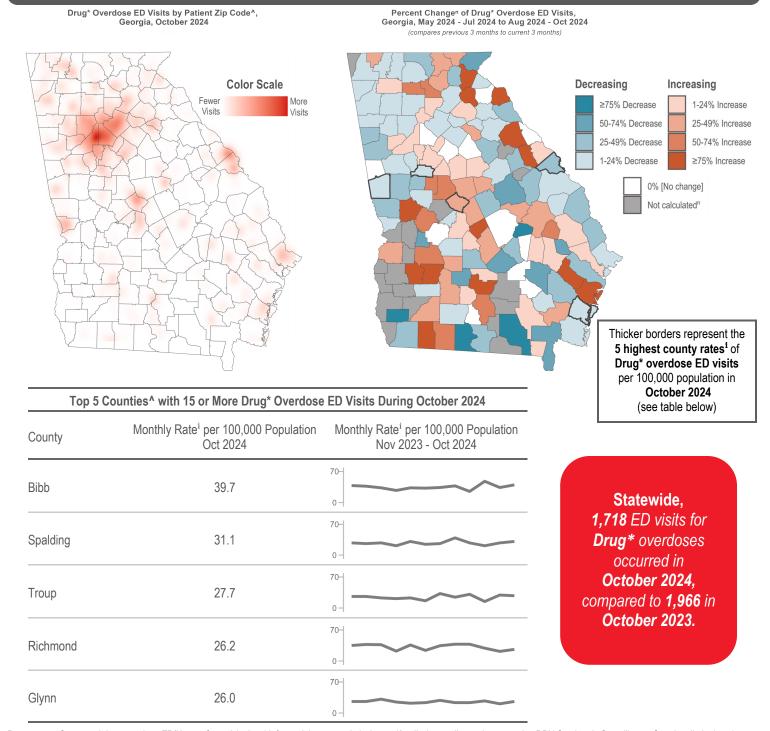
Syndromic Surveillance Drug Overdose Emergency Department Visits: Georgia, October 2024

<u>What is Syndromic Surveillance (SyS)?</u> SyS is used as an early detection method for potential clusters or outbreaks, by tracking suspected drug overdose-involved emergency department (ED) visits based on the patient's chief complaint upon admission and/or discharge diagnosis. Participating Georgia hospitals and urgent care facilities share these SyS data within the State Electronic Notifiable Disease Surveillance System (SendSS).



Data source: Suspected drug overdose ED/Urgent Care visits by chief complaint upon admission and/or discharge diagnosis reported to DPH Syndromic Surveillance. See data limitations here.
*Drugs may include any over the counter, prescription, or illicit drug.

Note: All data excludes patients ≤9 years of age. Counts represent the number of ED visits instead of the number of patients, therefore, patients with repeat visits may have been counted more than once.

Note: SyS data is not the same as emergency department discharge data; drug overdose SyS data is limited and based on accuracy of chief complaint and/or discharge diagnosis and what is reported to DPH SyS. Data is subject to change due to the current number of participating facilities and/or improvements to data quality. Data shown on this report may not depict the true burden of drug overdose in Georgia.



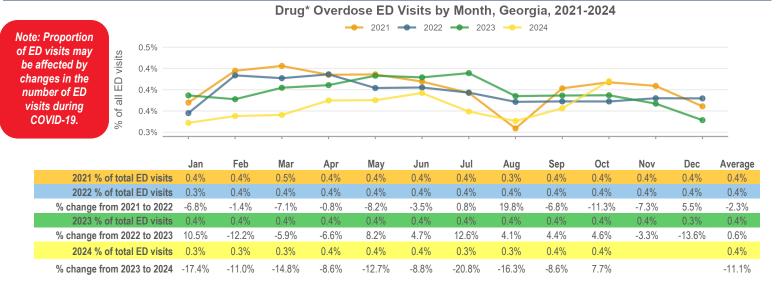
[^]Zip code and county are based on patient residence.

Rate indicates visits per 100,000 persons using 2023 Census data as the denominator. Excluded rates for counties with <15 visits.

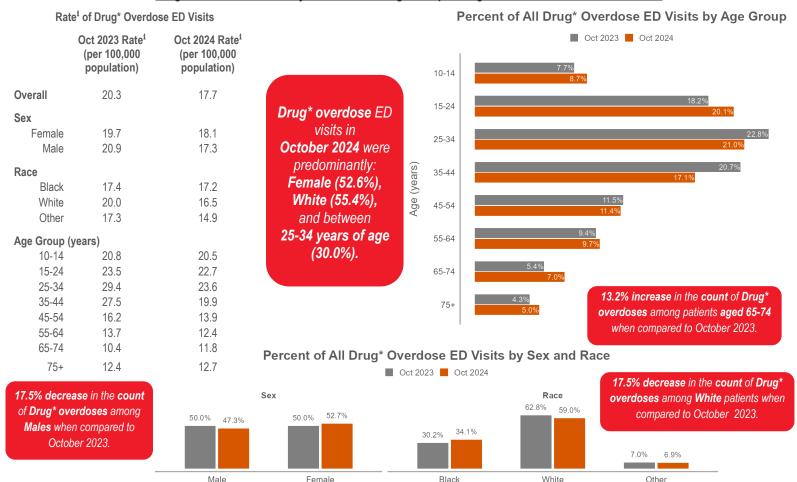
ⁿPercent change data by county excludes counties with less than 3 visits.

^{*}Drug Specific Categories are not mutually exclusive and include illicit and prescription drugs. Specific drugs identified using the chief complaint and/or discharge diagnosis fields and are not meant to be comprehensive.

Syndromic Surveillance Drug Overdose Emergency Department Visits: Georgia, October 2024



Drug* Overdose ED Visits by Sex, Race, and Age Group, Georgia, October 2023 and October 2024



Data source: Suspected drug overdose ED/Urgent Care visits by chief complaint upon admission and/or discharge diagnosis reported to DPH Syndromic Surveillance. See data limitations here. *Drugs may include any over the counter, prescription, or illicit drug.

Note: All data excludes patients ≤9 years of age. Counts represent the number of ED visits instead of the number of patients, therefore, patients with repeat visits may have been counted more than once.

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Rate indicates visits per 100,000 persons using 2023 Census data as the denominator. Excluded rates for counties with <15 visits.

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Syndromic Surveillance Drug Overdose Emergency Department Visits: Georgia, October 2024

OD ED Visits by Month and Drug Type*, Georgia, November 2023 - October 2024 Note: Due to Opioid — Fentanyl — Stimulant limitations 28.7% with drug decrease in Visits with OD e by Drug Type* testing in the count of EDs, Fentanyl drug 20.0% overdose and Stimulant visits categories are mentioning % of ED V Syndrome I likely under-Fentanyl 10.0% represented. when compared to October 2023 JUI 23 Serva 4042A % of ED Visits with OD Syndrome Involving Any Opioid, Georgia, 2021—2024 Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Average 2021 % of OD ED visits 25.6% 23.6% 24.4% 25.4% 25.8% 22 9% 24 4% 2022 % of OD ED visits 23.8% 21.4% 23.0% 24.3% 23.1% 26.1% 23.7% 24.0% 21.5% 20.9% 22.7% 24.0% 23.2% % change from 2021 to 2022 -0.9% -16.3% -11.0% -3.8% -11.5% 14.0% -1.2% 4.4% -9.1% -14.3% -0.5% -5.4% -4.6% 26.0% 24.7% 24.1% 2023 % of OD ED visits -2.7% -1.1% 13.2% -1.2% 8.2% 2.8% % change from 2022 to 2023 -5.4% 11.2% 14.0% 15.0% 6.3% 0.6% 5.1% 26.0% 2024 % of OD ED visits 20.3% 22.3% 22.4% 21.4% 23.5% 23.4% 21.8% 21.3% 25.4% 22.8% 5.7% -9.8% -6.4% -13.7% -9.7% 2.6% 0.3% -8.7% -11.8% -13.0% -6.4% % change from 2023 to 2024 % of ED Visits with OD Syndrome Involving Fentanyl, Georgia, 2021—2024 Jan Feb Mar May Oct Nov Dec Apr Jun Jul Aug Sep Average 2021 % of OD ED visits 0.9% 0.6% 0.8% 0.9% 1.2% 1.1% 0.8% 1.1% 1.3% 1.4% 1.3% 1.8% 1.1% 2.7% 2.7% 2.3% 2.7% 3.2% 2.5% 2.4% 3.2% 2.4% 2022 % of OD ED visits 1.3% 1.2% 2.3% 2.6% % change from 2021 to 2022 82.7% 168.2% 119.2% 107.5% 224.0% 184.5% 90.1% 86.9% 80.8% 76.3% 122.0% 48 0% 196.0% 4.3% 2023 % of OD ED visits 4.5% 4.3% 4.7% 4.4% 4.79 4.0% 4.2% 35.1% % change from 2022 to 2023 192.9% 273.0% 76.2% 25.1% 38.8% 99.0% 73.6% 70.6% 70.9% 96.9% 25.6% 89.8% 2024 % of OD ED visits 4.3% 4.4% 4.8% 3.8% 3.9% 4.0% 3.9% 3.7% 3.7% 3.6% 4.0% % change from 2023 to 2024 8.5% 1.2% 18.8% 14.0% 4.1% -12.0% -16.9% -14.8% -13.9% -18.4% -2.9% % of ED Visits with OD Syndrome Involving a Stimulant, Georgia, 2021—2024 Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Average 2021 % of OD ED visits 5.7% 5.5% 4.9% 5.0% 4.2% 4.4% 6.9% 5.3% 6.2% 5.2% 5.3% 5.3% 5.3% 2022 % of OD ED visits 5.0% 5.4% 5.5% 5.6% 5.6% 6.6% 5.3% 5.4% 5.0% 4.3% 5.9% 4.3% 5.3% % change from 2021 to 2022 -28.0% 2.0% -3.7% 2.4% -9.8% 36.0% 6.1% 27.3% -2.9% -18.5% 33.8% -19.8% 2.1% 2023 % of OD ED visits

Link(s) of interest:

Georgia Department of Public Health, Prescription Drug Monitoring Program, Quarterly Surveillance Reports, Quarter 1 – 2 2024

5.3%

5.6%

-3.7%

-29.1%

5.7%

20.6%

2.5%

5.6%

2.4%

-2.3%

5.9%

12.4%

15.7%

6.1%

4.2%

38.5%

5.5%

-8.1%

-10.2%

8.3%

1.1%

5.5%

3.3%

CDC MMWR, Notes From the Field: Ketamine Detection and Involvement in Drug Overdose Deaths – United States, July 2019 – June 2023

Data source: Suspected drug overdose ED/Urgent Care visits by chief complaint upon admission and/or discharge diagnosis reported to DPH Syndromic Surveillance. See data limitations here.
*Drugs may include any over the counter, prescription, or illicit drug.

% change from 2022 to 2023

% change from 2023 to 2024

2024 % of OD ED visits

7.4%

5.7%

5.7%

-3.8%

4.6%

-11.7%

-10.4%

4.2%

-14.6%

-8.5%

6.5%

25.5%

Note: All data excludes patients ≤9 years of age. Counts represent the number of ED visits instead of the number of patients, therefore, patients with repeat visits may have been counted more than once.

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