

State Unintentional Drug Overdose Reporting System (SUDORS) Opioid-involved Overdose Deaths, Georgia, July 2017 – June 2018*

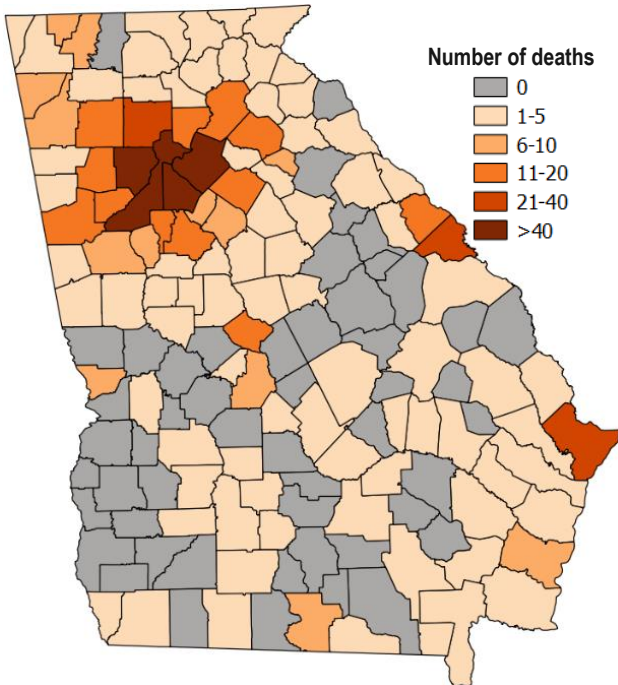
The State Unintentional Drug Overdose Reporting System (SUDORS) collects detailed investigative and toxicological information from Coroners/Medical Examiners about unintentional drug overdose deaths, to better understand the changing nature of the opioid epidemic and inform key stakeholders.

Unintentional Opioid-involved[^] Overdose Deaths (OI-OD)

OI-OD by Medical Examiner (ME) Entity^o

Cobb		DeKalb		Fulton		Gwinnett		GBI		Total	
#	%	#	%	#	%	#	%	#	%	#	%
98	11.5%	102	11.9%	120	14.0%	53	6.2%	482	56.4%	855	100.0%

OI-OD by County of Injury



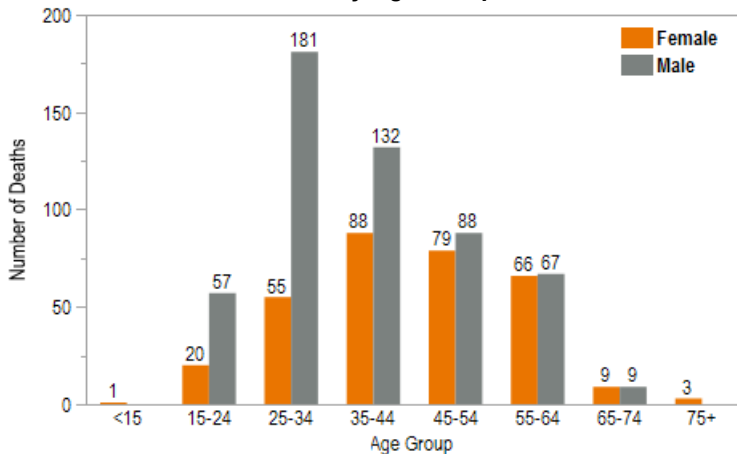
OI-OD by Selected Demographics

	#	%	Rate* (per 100,000 Population)
Total	855	100.0%	8.13
Sex			
Male	534	62.5%	10.44
Female	321	37.5%	5.94
Race			
White	732	85.6%	11.51
Black	109	12.7%	3.20
Other/Unknown	14	1.6%	1.87
Age Group (years)			
<15	1	0.1%	0.05
15-24	77	9.0%	5.33
25-34	236	27.6%	16.02
35-44	220	25.7%	16.03
45-54	167	19.5%	11.83
55-64	133	15.6%	10.34
65-74	18	2.1%	2.01
75+	3	0.4%	0.53

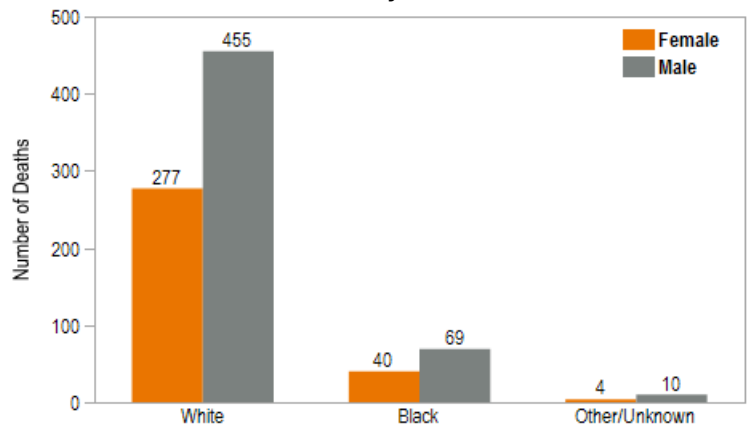
Opioid-involved unintentional drug overdose deaths in Georgia from July 2017 to June 2018 were predominantly:

- Male (62.5%)
- White (85.6%)
- Between 25-34 years of age (27.6%)

OI-OD by Age Group & Sex



OI-OD by Race & Sex



Data source: Georgia Violent Death Reporting System (GA-VDRS) and State Unintentional Drug Overdose Reporting System (SUDORS)

* Data includes unintentional opioid overdose cases that overdosed in Georgia with date of death from July 2017 – June 2018; contains Georgia and non-Georgia residents.

^o ME entity determined by certifier county. DeKalb ME includes DeKalb, Hall, Henry, and Rockdale counties. GBI includes all other counties not represented by an ME.

[^] Opioid-involved includes cases with an opioid listed in the cause of death. These cases may have also tested positive for other non-opioid substances.

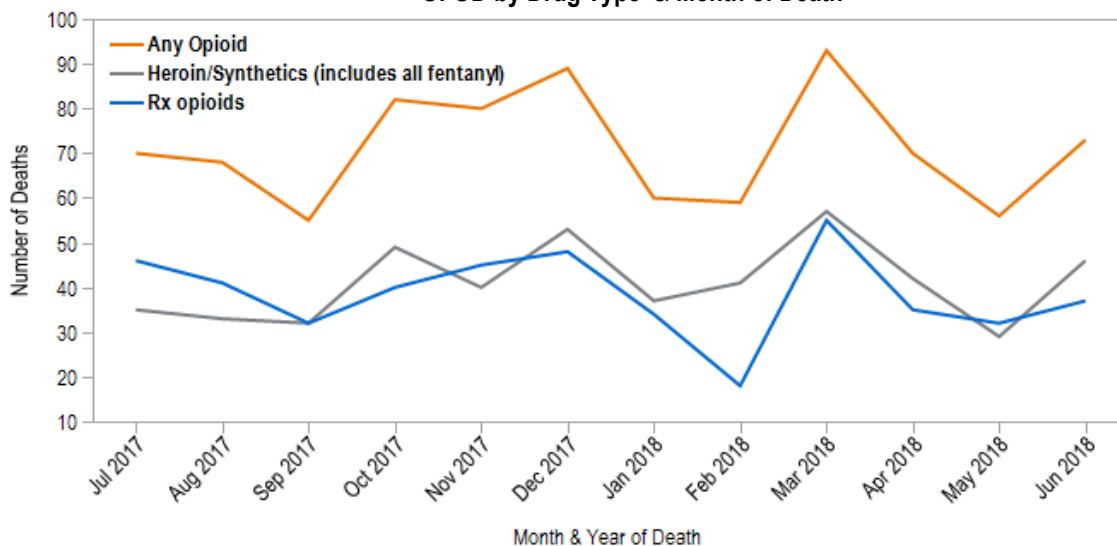
*Rate indicates deaths per 100,000 persons using 2018 Census data as the denominator.

Note: Data is subject to change due to data quality improvements. Data shown on this report may not depict the true burden of opioid overdose deaths in Georgia.

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Unintentional Opioid-involved[^] Overdose Deaths (OI-OD) *Continued*

OI-OD by Drug Type¹ & Month of Death

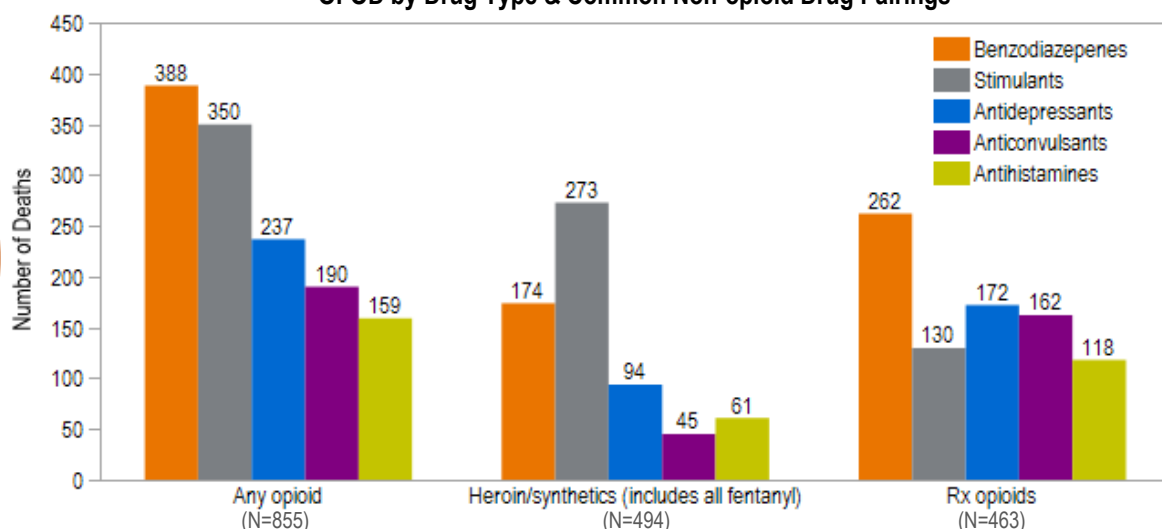


37.0% of heroin-involved deaths tested positive for synthetics, and 16.5% tested positive for Rx opioids

Of Rx opioid-involved deaths:

- 9.1% also tested positive for heroin
- 18.4% also tested positive for synthetics
- 25.3% tested positive for either heroin or synthetics

OI-OD by Drug Type & Common Non-opioid Drug Pairings¹



91.8% of opioid-involved unintentional drug overdose deaths in Georgia from July 2017 to June 2018 tested positive for more than 2 substances

Median number of substances present was 6

Did you know?

GA DPH uses overdose death reports (i.e. scene investigation, autopsy, toxicology results) from coroners/medical examiners (C/MEs) to abstract pertinent information into a national database developed by CDC.

96.5% of all unintentional opioid-involved overdose deaths from July 2017 – June 2018 had C/ME reports submitted to GA DPH. The average time frame between death and certification of these deaths was **66 days**. Long lag times are often due to pending toxicology results.

For faster reporting, a **suspect overdose checkbox field** was added to GAVERS, which does NOT print on the death certificate.

Cause of death (CoD) text is important for drug overdose surveillance. In order to determine what kind of overdoses are trending upward and/or identify the presence of a dangerous new substance, drug-specific terms **MUST** be included in the CoD text. During this time period, **5.2%** of all unintentional drug overdose deaths contained vague CoD text like “mixed drug toxicity” or “drug overdose”

Findings from these data can help inform drug overdose prevention & response efforts!

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¹ Drug-specific categories are not mutually exclusive. Counts were derived from positive toxicology results. Cases may have also tested positive for other substances. Synthetics includes fentanyl, fentanyl analogs, U47700, U48800, U49900, AH7921, and MT45. Rx opioids includes oxycodone, oxymorphone, hydrocodone, hydromorphone, tramadol, buprenorphine, methadone, meperidine, tapentadol, dextrophan, levorphanol, propoxyphene, pentazocine, phenacetin, and morphine or codeine with reported evidence of prescription consumption. Stimulants include cocaine and amphetamines. Antihistamines include diphenhydramine, promethazine, hydroxyzine, and doxylamine.

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