



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
OFFICE OF THE CHIEF MEDICAL EXAMINER

401 E Street, SW – 6<sup>th</sup> Floor  
Washington, DC 20024



**Methamphetamine-Related Deaths: January 1, 2015 to December 31, 2021**

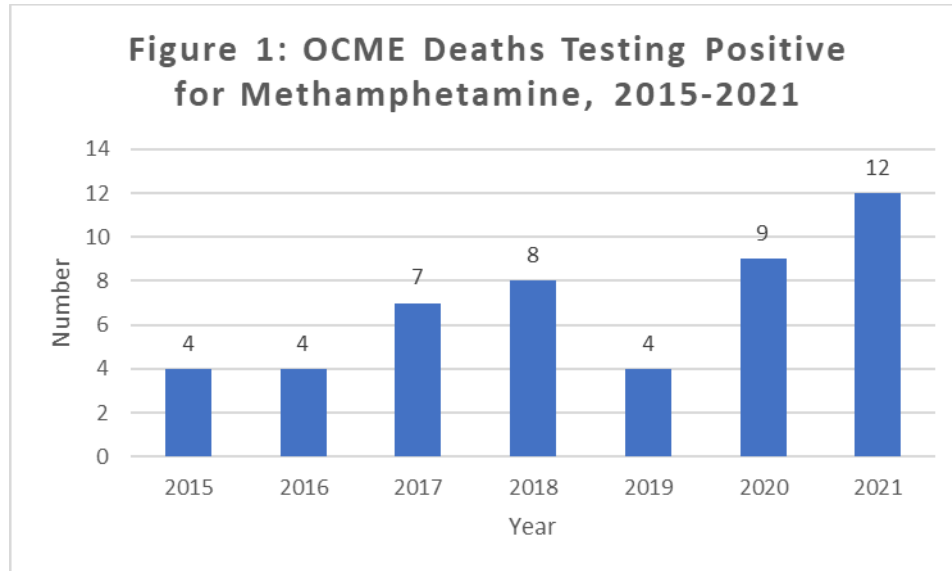
*Report Date: November 28, 2022*

An increase in methamphetamine-related deaths has been *observed* across the District of Columbia. The DC Office of the Chief Medical Examiner (OCME) detected methamphetamine in **48<sup>1</sup>** deaths from January 1, 2015 through December 31, 2021. This report examines the presence of methamphetamine in deaths observed at the OCME.

**Trends in Deaths due to Methamphetamine Use**

Meth Detected at Death

Figure 1 displays methamphetamine identified through toxicology testing of decedents from January 1, 2015 to December 31, 2021. The number of methamphetamine-related deaths increased between 2016 and 2018. Despite observing a decrease in 2019, the number of methamphetamine-related deaths increased by 125% (n=9) in 2020. This trend of increasing methamphetamine-related deaths continued into 2021.

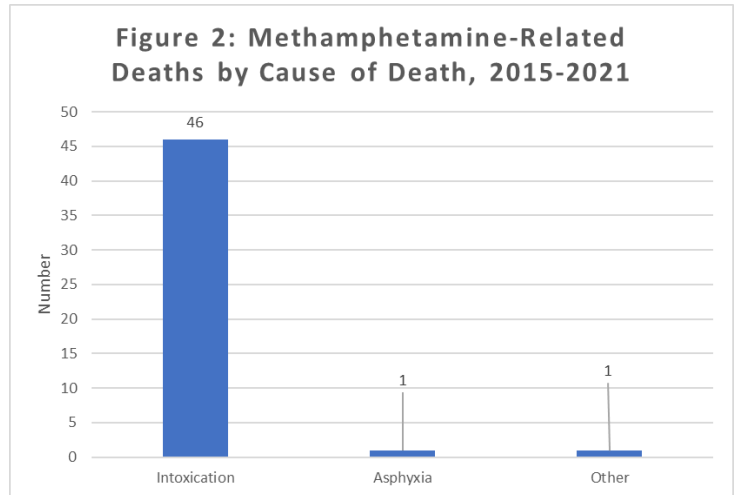


<sup>1</sup> The data presented in this report includes 3 cases where the Manner of Death was not “Accident”: 1 case in 2017, 1 case in 2018, and 1 case in 2021.



Meth Condition as Cause of Death

Between 2015 and 2021, the DC Office of the Chief Medical Examiner determined intoxication (n=46, 96%) was the most prevalent cause of death investigated compared to other methamphetamine-related causes of death (Fig. 2). Although methamphetamine intoxication was not determined to be the immediate cause of death in two cases during this period, the use of methamphetamine was a contributing factor.



Co-involvement of Opioids and Other Drugs

Polysubstance – Opioids

Figure 3 displays the number of methamphetamine deaths where opioids were also identified through toxicology testing of the decedents from 2015 to 2021. Methamphetamine-related deaths co-involving synthetic opioids (primarily fentanyl) increased **6-fold** between 2015-2021 from 1 to 6 deaths. Disclaimer: incidence of opioids by opioid type are not mutually exclusive.

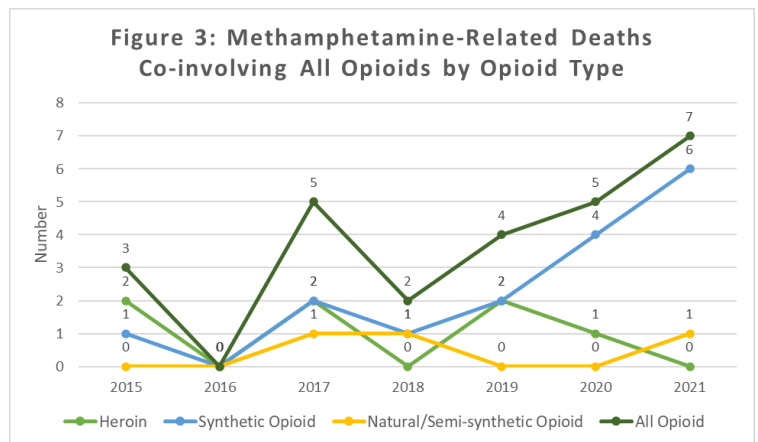


Figure 4 highlights the number of methamphetamine-related deaths where fentanyl and/or fentanyl analogs contributed to cause of death. Despite observing a decrease in 2018, methamphetamine-related deaths involving fentanyl or fentanyl analogs observed by OCME increased **100%** in 2019 and 2020 and **50%** in 2021. Disclaimer: incidence of fentanyl and/or fentanyl analogs are mutually exclusive.

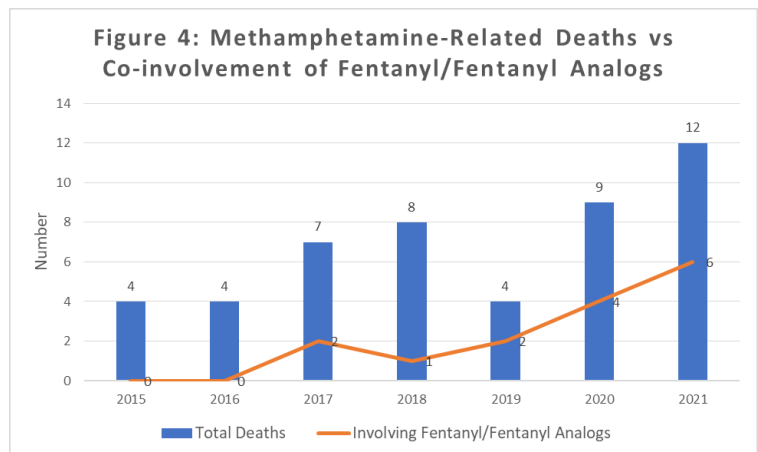
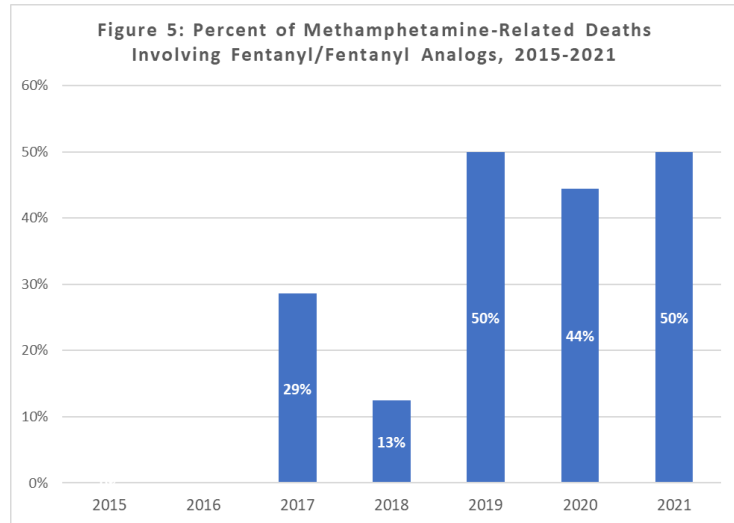
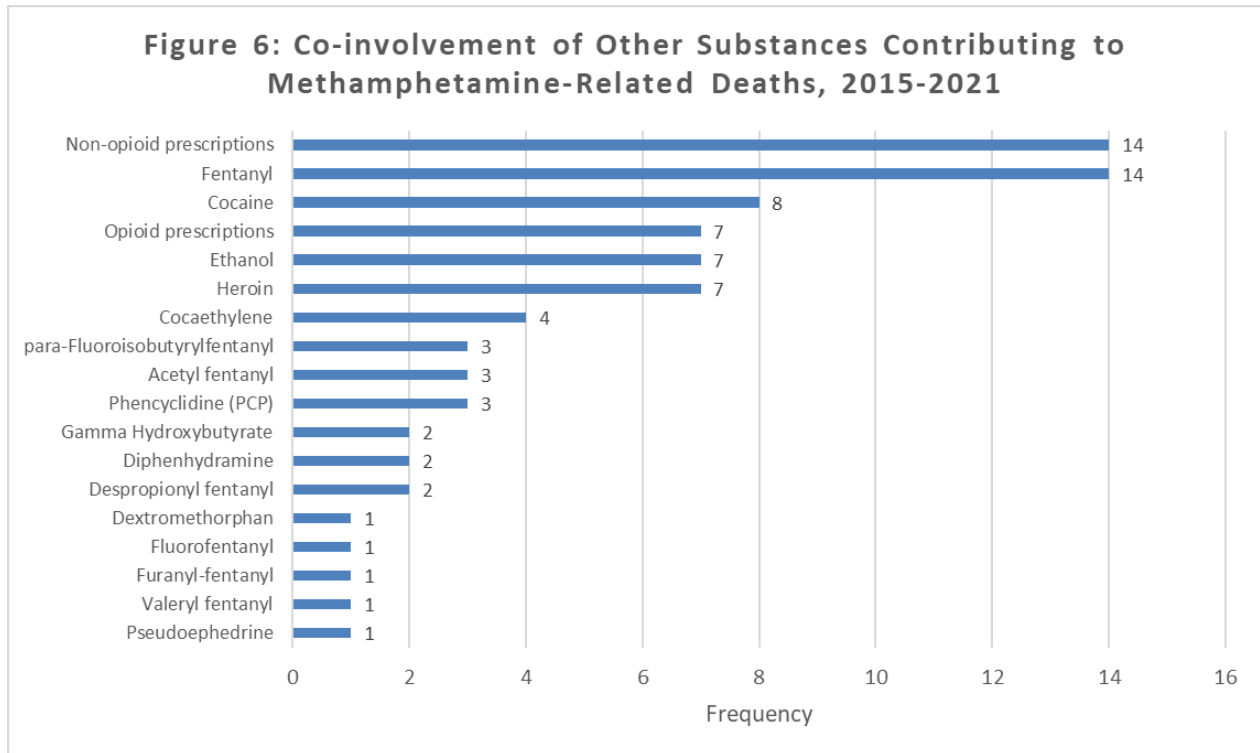


Figure 5 highlights the percentage of methamphetamine-related deaths involving fentanyl and/or fentanyl analogs. In 2015 and 2016, 0% of cases involved fentanyl or fentanyl analogs. From 2019 to 2021, about **half** of all methamphetamine-related deaths involved fentanyl or fentanyl analogs.



Polysubstance - Other

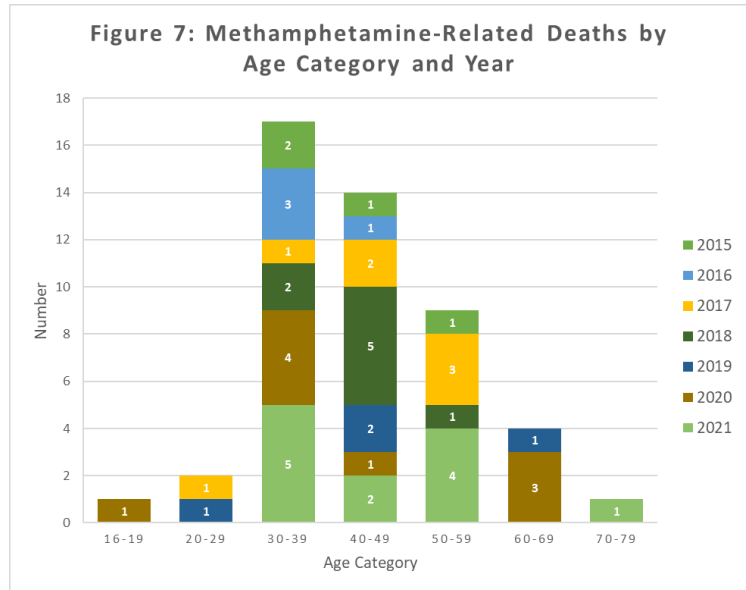
**30 other** substances were found through toxicology testing among methamphetamine-related deaths from 2015 to 2021 including 4 opioid prescriptions and 10 non-opioid prescriptions (Fig. 6). Methadone was the most observed opioid prescription co-involved (n=3) followed by oxycodone (n=2), and buprenorphine and morphine (n=1). Bupropion and amphetamine were the most observed non-opioid prescriptions co-involved (n=2) followed by gabapentin, sertraline, trazadone, citalopram, hydroxyzine, butalbital, fluoxetine, and ketamine (n=1).



**Demographics**

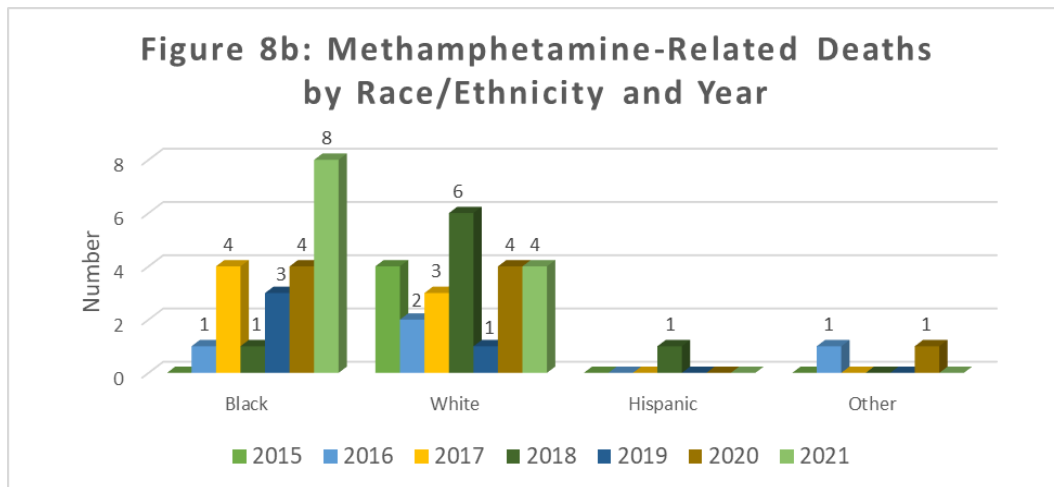
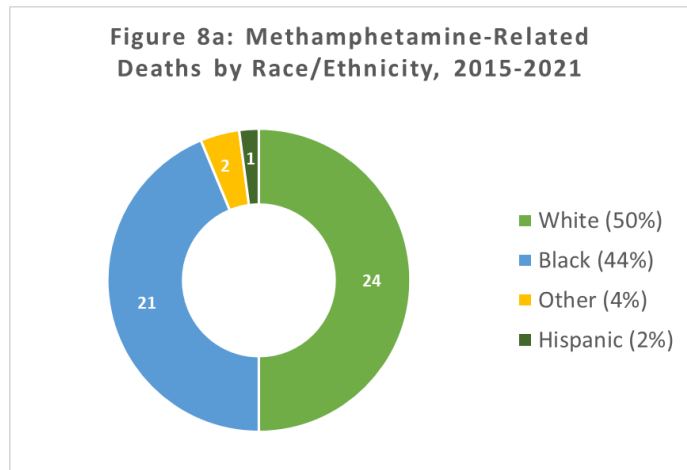
**Age**

Approximately **83%** of all methamphetamine-related deaths occurred among adults between the ages of 30-59 years old (Fig. 7). Methamphetamine-related deaths were most prevalent among people ages 30 to 39 (n=17, 35%).



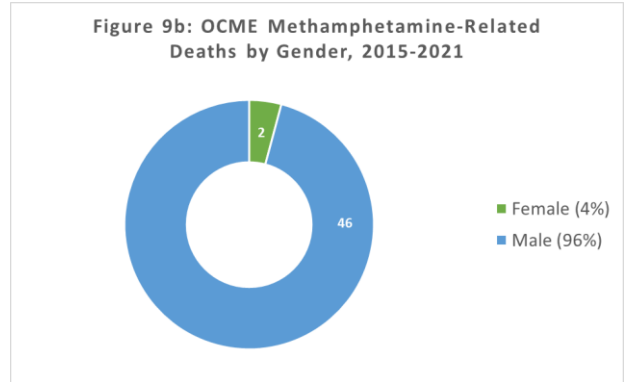
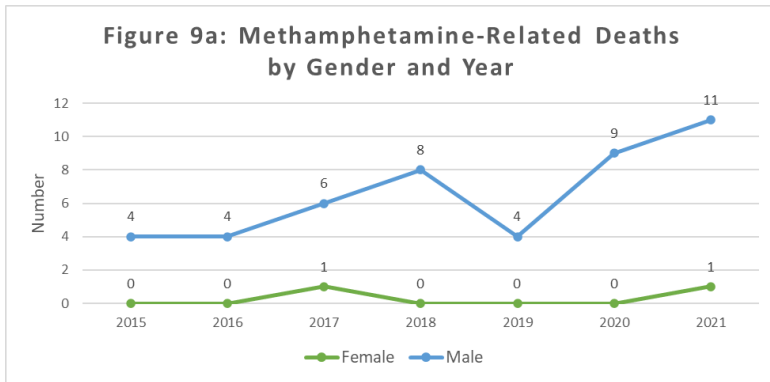
**Race/Ethnicity**

Overall, **50%** of all methamphetamine-related deaths were among Whites (Fig. 8a). However this trend varies across years (Fig. 8b).



Gender

Methamphetamine-related deaths were most prevalent among males in 2015-2021 (Fig. 9a). Overall, males accounted for **96%** of all methamphetamine-related deaths observed at the DC OCME (Fig. 9b).



Jurisdiction of Residence

**74%** of the decedents were residents of DC (n=35) (Fig. 10). From January 1, 2015 to December 31, 2021, methamphetamine-related deaths were most prevalent in **Wards 1, 2, & 8** (n=22, 63%) (Fig. 11). However, there are variations across years.

