Opioid-related Fatal Overdoses: January 1, 2014 to November 30, 2016\(^1\)
Report Date: February 21, 2017

The DC Office of the Chief Medical Examiner (OCME) investigated a total of 395\(^2\) deaths due to use of opioids from January 1, 2014 through November 30, 2016, 83 deaths in CY 2014, 114 in CY 2015 and 198 deaths to date in CY 2016 respectively. This report examines the presence of opioids (heroin, fentanyl, fentanyl analogs, morphine, prescription opioids and the general classification of opiates) in the deaths observed at the OCME. The tables and graphs below present the decedent information by trends, demographics, and jurisdiction of residence.

Incidence of Opioids by Year
Each drug is counted independently in fatalities involving more than one of these drugs and ranged from 1 to 5 opioids identified per death. Therefore, there were a total of 120 opioids\(^3\) found in the 83 deaths in 2014, 160 opioid found in the 114 deaths in 2015 and 327 opioids found in the 198 deaths in 2016. As depicted in the graph to the right, the total number of opioids that caused a death increased from 2014 to 2016. The total number of opioids contributing to drug overdoses in 2016 is double the total number of drugs observed in 2015.

Trends in Deaths due to Opioid Use
Examining the monthly trends in deaths caused by opioid drug use, more fatalities occurred in the month of May of 2016 than any other month over the past five years. Overall, there was a 102% increase in fatal overdoses due to opioid use from 2014 (n=83) to 2016 (n=198).

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\(^1\) Data for 2016 is inconclusive and subject to change due to cases where cause and manner of death is “Pending Further Investigation”

\(^2\) The data presented in this report includes 10 cases with a Manner of Death other than Accidental Intoxication - three cases in 2014, one case in 2015, and one case in 2016 in which the Manner of Death was Undetermined but the Cause of Death was due to opioid drug use. Additionally there were 2 cases with Manner of Death of Suicide in 2014, one case in 2015 and two cases in 2016.

\(^3\) Morphine and fentanyl can both be prescribed. However, for the sake of this report, they are included under the illicit opioids
Increase in the Presence of Fentanyl/Fentanyl Analogs

Seventy-five percent of deaths involving acetyl fentanyl were found among decedents between the months of September through December of 2015. In 2016, approximately 59% of the cases had either fentanyl or a fentanyl analog (fentanyl, furanyl-fentanyl, despropionyl-fentanyl, or p-fluoroisobutyryl-fentanyl) on board. There was a noticeable increase in the presence of fentanyl and fentanyl analogs beginning in March 2016; ranging from 52% (September) to 73% (November) of cases containing fentanyl or fentanyl analogs.

Demographics

Race/Ethnicity

Overall, 308 or 78% of all deaths due to opioid use were among Blacks. Moreover, this trend remains when examining the data across years.

Gender

Fatal overdoses due to opioid drug use were more common among males than females across years.

Age

Approximately 81% of all overdoses due to opioid drug use happen among adults between the ages of 40-69 years old. Overall, deaths due to opioid use were most prevalent among people ages 50 to 59 (40%). There were no deaths from the use of opioids among individuals younger than 16 and older than 89.
Jurisdiction of Residence

Overall, opioid-related fatal overdoses were most prevalent in Ward 8 (25% of all cases). However, there are variations across study years. For example, opioid-related fatal overdoses were most prevalent in wards 7 and 8 in 2015 compared to Wards 5 and 7 in 2014. The largest increase from 2014 to 2015 was observed in Ward 8, which increased by over 250%. In 2016 to date, opioid-related overdoses are most prevalent in Wards 5, 7, and 8 respectively.

The graphs to the right depict the total number of heroin, morphine, fentanyl, and fentanyl analogs that contributed to death by Ward of Residence. Each drug is counted independently in fatalities involving more than one of these drugs. The total number of opioids found in fatal overdoses increased between 2014 and 2015. Overall, in the District there were a total of 64 counts of heroin, morphine, and fentanyl that contributed to fatal overdoses in 2014. However, in 2015, the number of opioids that contributed to a fatal overdose in the District increased to a total of 100 opioids (heroin, morphine, fentanyl, and acetyl fentanyl). Fentanyl is a synthetic and short acting opioid analgesic that has been approved for managing acute or chronic pain. Fentanyl and fentanyl analogs are highly potent synthetic opioids, which are more potent than morphine and heroin. According to the CDC, acetyl fentanyl is a synthetic opioid equivalent fentanyl that is up to five times more potent than heroin. There were zero cases of acetyl fentanyl in 2014. In contrast, nine of the twelve cases of acetyl fentanyl found in 2015 were among decedents that were residence of the District. To date in 2016, there were a total of 224 illicit opioids (heroin, morphine, fentanyl, furanyl-fentanyl and despropionyl-fentanyl).

http://www.emergency.cdc.gov/HAN/han00350.asp
identified. Although, there are zero cases of acetyl fentanyl in 2016, new fentanyl analogs have emerged that are equally as potent.

**Prescription Opioids**

There were 127 prescription opioids found in the 395 drug overdoses between 2014 and 2016. Despite the downward trend in the number of fatal overdoses related to prescription opioids between 2014 and 2015, the number of fatal overdoses involving prescription opioids in 2016 (n=53) is now higher than the number of fatal overdoses involving prescription opioids over the past two years (2014,n=45) and (2015,n=29). Overall, methadone and oxycodone are the most commonly used prescription opioids that contributed to a drug overdose. However, there are differences when you examine the data by year.