

Suspected Nevada Drug Overdose Surveillance Monthly Report

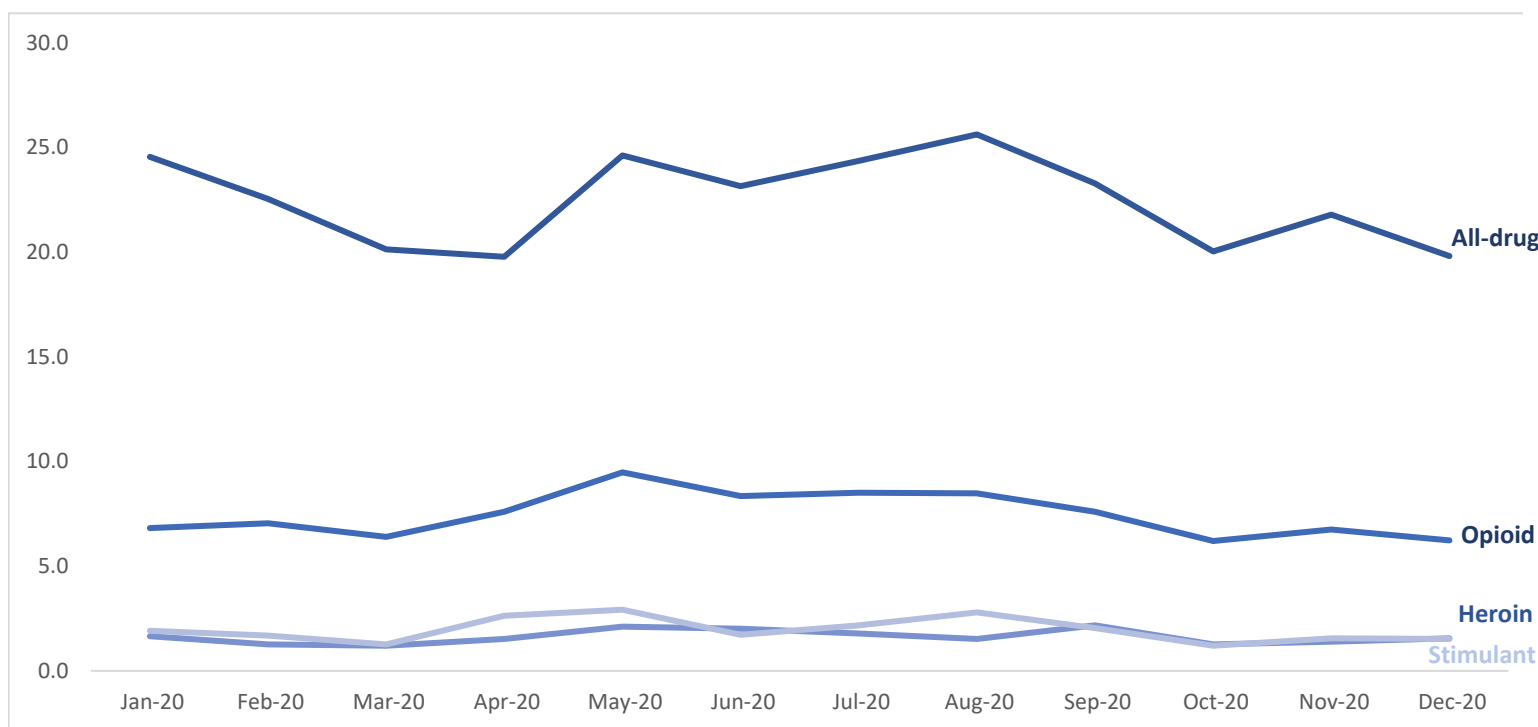
January 2021: *Statewide Report*

The Centers for Disease Control and Prevention (CDC) Overdose Data to Action (OD2A) is a program that supports state, territorial, county, and city health departments in obtaining more comprehensive and timelier data on overdose morbidity and mortality. The program is meant to enhance opioid overdose surveillance, reporting, and dissemination efforts to better inform prevention and early intervention strategies. The information contained in this monthly report highlights suspected **overdose morbidity** within the state of Nevada utilizing emergency department (ED) visits data from the National Syndromic Surveillance Program for the month of December 2020.

Report Highlights:

- All suspected drug-related ED visit rates decreased by 9% from November 2020 to December 2020.
- From 2019 to 2020, suspected drug-related ED visits increased slightly by about 3%, suspected opioid visits increased by 26% and heroin visits increased by 16%.
- Patients that visited the ED for drug-related issues in December 2020 were more likely to be male, White, and between the ages of 15-44.

Figure 1. Suspected monthly rates for all drug, opioid, heroin, stimulant-related ED visits (per 100,000 population)



Technical Notes:

Data Sources: National Syndromic Surveillance Program is a near real-time method of categorizing visits to the ED across Nevada based on a patient's chief complaint and/or discharge diagnosis.

Case definitions: Case definitions and queries for suspected all drug, opioid, heroin, and stimulant ED visits are created and provided by CDC and include chief complaint keywords and ICD-10-CM discharge diagnosis codes.

Analysis: ED visit rates per 100,000 population were calculated using Census Bureau estimates. ED visit counts for age and sex categories with less than 10 counts for any month were not included.

Limitations: Statewide, the National Syndromic Surveillance Program is estimated to capture approximately 90% of Nevada emergency department visits, and thus may underestimate the occurrence of overdoses across the state. Since not everyone who overdoses is able to make it to the ED, this report may underestimate the total overdose burden in the state.

Address questions/comments to Nevada OD2A's opioid epidemiologist, Shawn Thomas, MPH, at shawnt@unr.edu.



2019 vs 2020 Comparisons:

Table 1. Suspected all-drug, opioid, heroin, and stimulant-related ED visits in Nevada, 2019 vs 2020

Month	All drug visits		Opioid visits		Heroin visits		Stimulant visits	
	2019	2020	2019	2020	2019	2020	2019	2020
January	622	759	168	210	36	51	42	59
February	623	701	163	217	48	39	47	52
March	699	626	207	197	52	37	73	39
April	701	612	193	234	39	47	54	81
May	684	761	163	292	39	65	68	90
June	675	719	180	257	43	62	70	53
July	717	754	207	262	45	55	63	67
August	716	795	192	261	57	47	83	86
September	728	722	175	234	40	67	53	63
October	686	622	179	191	44	39	50	37
November	615	671	181	208	34	43	52	47
December	651	610	177	192	40	48	59	47
Total	8117	8352	2185	2755	517	600	714	721
% Change	+2.9%*		+26.1%*		+16.1%*		+1.0%	

Note: Total reflects the sum of ED visits for specific substance-related ED visits from January-November for a particular year. Data undergoes internal quality checks, so data may be subject to change slightly in future reports. % Change indicates the difference in visits between 2019 and 2020. *Indicates a statistically significant % change from 2019 to 2020 (p-value<0.05). From April to September 2020 there was a decline in people presenting to the ED for any reason, so interpret differences between years with caution.

Figure 2. Suspected all drug-related ED visits in Nevada, 2019 vs 2020

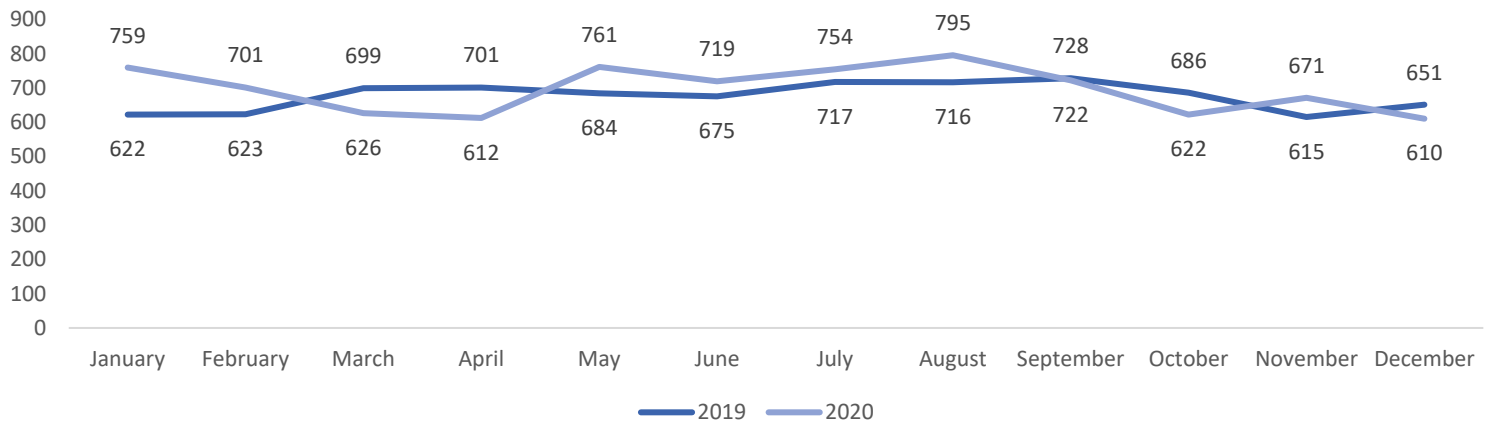
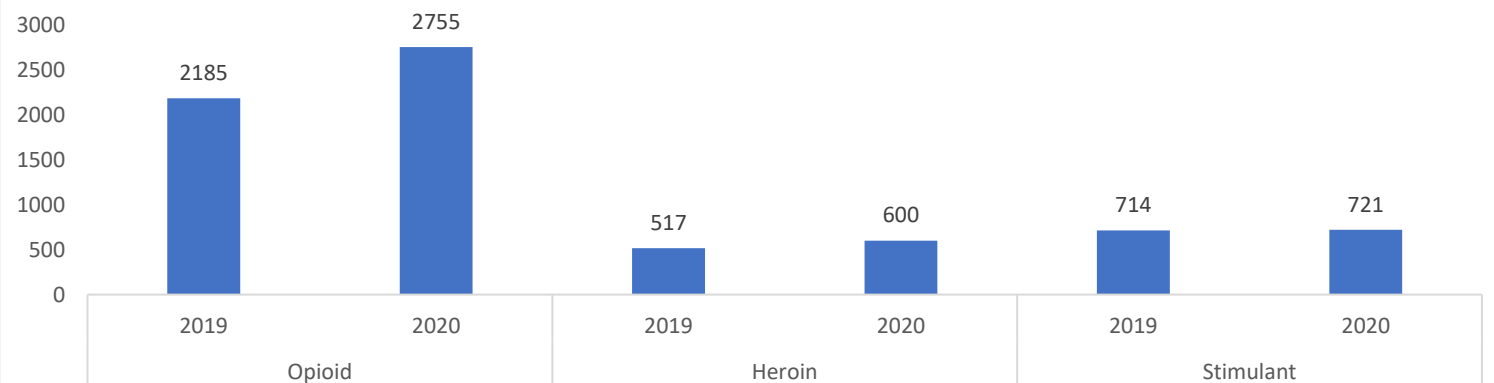


Figure 3. Suspected opioid, heroin, and stimulant-related ED visits in Nevada, 2019 vs 2020



December 2020 Spotlight:

Figure 4. Suspected rates for all drug, opioid, and heroin-related ED visits, December 2018-2020 (per 100,000 population)

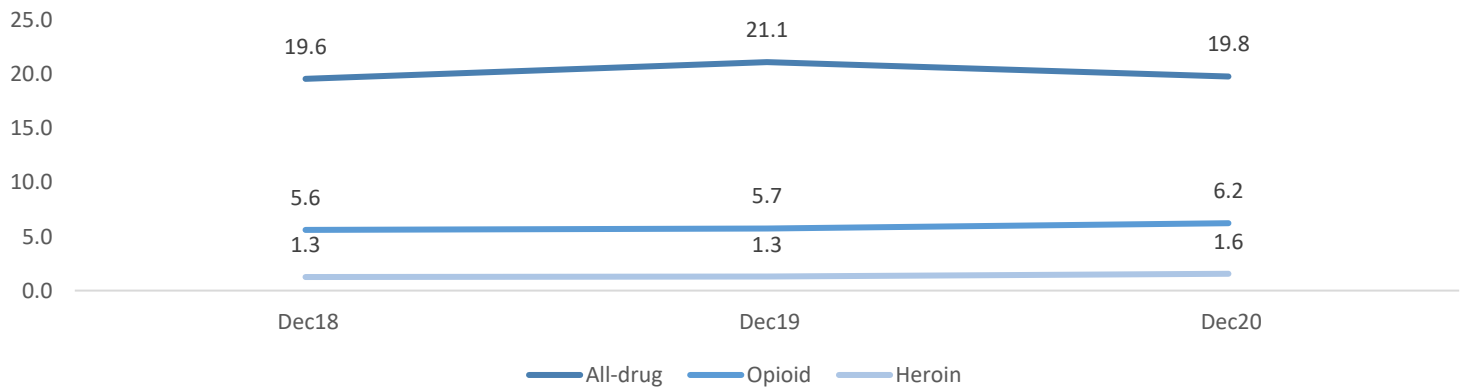


Figure 5. Sex of suspected drug-related ED visits, December 2020 (N=609)

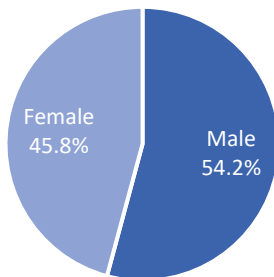


Figure 6. Race/Ethnicity of suspected drug-related ED visits, December 2020 (N=599)

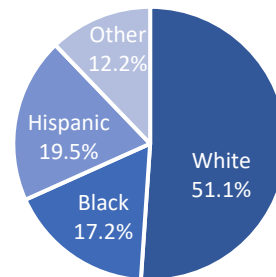
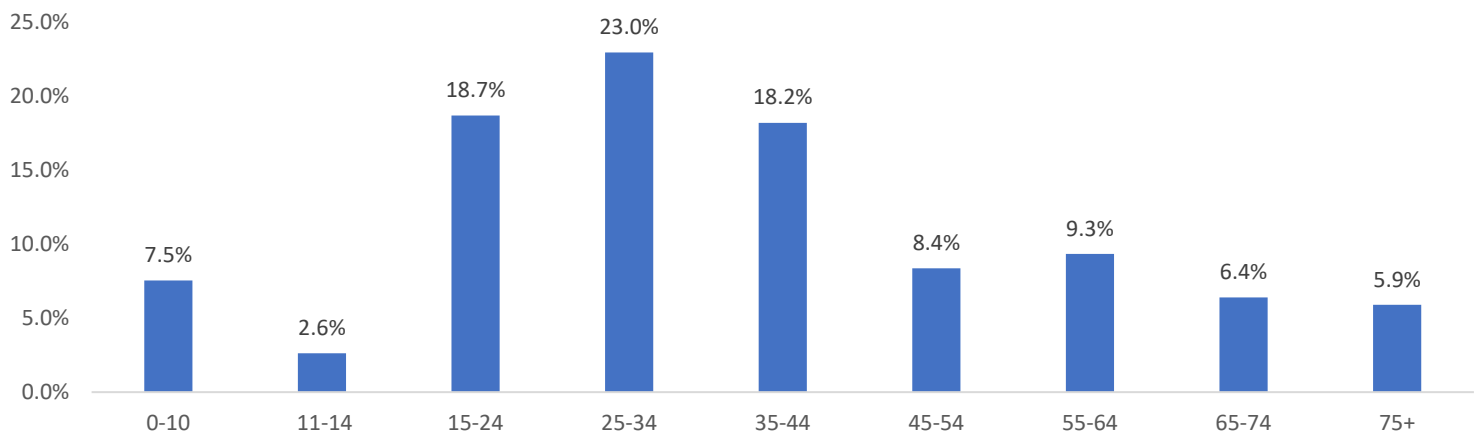


Figure 7. Age of suspected drug-related ED visits, December 2020 (N=610)



Note: Other Race includes American Indian/Alaskan Native, Asian, Native Hawaiian/Other Pacific Islander, and Other Race. Race/Ethnicity is based off of PHIN flatline codes and data quality may change month to month and providers may enter more than one code, so visits were assigned the most appropriate race/ethnicity. Totals exclude missing data.

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