OPIOID SURVEILLANCE SUMMARY

CK Public Health • 435 Grand Avenue West, Chatham, ON N7M 5L8
Tel: 519.352.7270 •Fax: 519.352.2166 • Email: ckpublichealth@chatham-kent.ca



OCTOBER 2022

This summary¹ provides local and provincial surveillance information. For some indicators, there is a lag time to receive data, so data are shown for the most recent complete month available. For more detailed provincial and local data visit Public Health Ontario's Interactive Opioid Tool and the Ontario Opioid Indicator Tool.

EMERGING ISSUES & NEW RESOURCES

The Ontario Opioid Indicator Tool has recently been updated with new indicators which have an increased focus on opioids used for the treatment of opioid use disorder, as well as complications arising from opioid-related harms. A dashboard specific to harm reduction will be available soon.

CHATHAM-KENT ACTIVITY	
EMS Calls ²	 4 suspect opioid overdose-related calls to CK EMS in September (57 to date in 2022) (Figure 1) 8 non-opioid drug overdose-related calls to CK EMS in September (88 to date in 2022)
Emergency Department Visits ³	• 5 opioid overdose-related ED visits by CK residents in September (63 to date in 2022 or 58.8 per 100,000) (Figure 1)
Deaths ⁴	 1 suspect drug-related death in CK in September (32 to date in 2022 or 29.9 per 100,000) (Figure 1) 9 confirmed opioid-related deaths in CK between January and March 2022 (8.4 per 100,000; 16 deaths in 2021 or 15.0 per 100,000) (Figure 1)
OVERALL	 The number of opioid-overdose related EMS calls and ED visits in September were comparable to previous months and suspect drug deaths were lower. CK's rate of ED visits for 2022 to date is slightly higher than the province overall and the rate of monthly suspect drug deaths continues to be significantly higher than the province. For the first quarter of 2022, CK experienced a higher rate of opioid-related deaths compared to the province (8.4 versus 3.3 per 100,000), which was one of the highest rates of all public health units.

PROVINCIAL ACTIVITY	
Emergency Department Visits ³	• 648 ED visits in September (8,369 to date in 2022 or 55.3 per 100,000)
Deaths ⁴	 224 suspect drug-related deaths in September (2,418 to date in 2022 or 16.0 per 100,000) 506 confirmed opioid-related deaths between January and March 2022 (3.3 per 100,000; 2,783 deaths in 2021 or 18.7 per 100,000)
OVERALL	 The number of ED visits and suspect drug deaths were similar to August and lower compared to spring/summer months. Since the beginning of 2022, monthly ED visits been lower compared to what was observed for most of 2021. Monthly suspect drug deaths have been the lowest on record since early 2020.

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Figure 1. Opioid overdose-related ED visits and EMS calls and suspect drug-related and confirmed opioid-related deaths in Chatham-Kent, January 2019 to September 2022

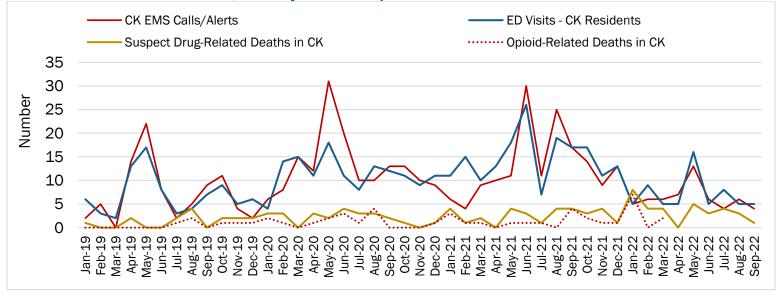
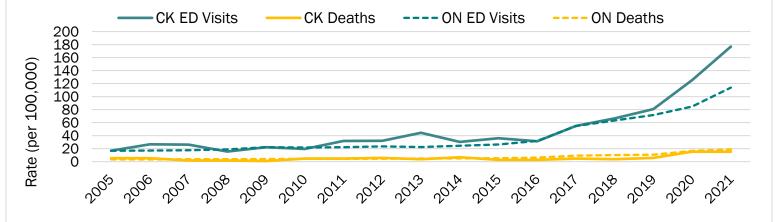


Figure 2. Rates⁴ of opioid overdose-related ED visits, hospitalizations and deaths, Chatham-Kent, 2005-21



NOTES

¹Content and format of this information summary has been adapted from Lambton Public Health

² EMS calls up to and including September 2022 are based on calls for service by month provided by Chatham-Kent EMS.

CONTACT:

Laura Zettler, Epidemiologist, CK Public Health

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³ Emergency department visits were provided by the Ontario Ministry of Health and Long-Term Care (Weekly emergency department visits for opioid overdose Week 28: Oct 3 to 9, 2022). All Ontario hospitals are required to report cases of opioid overdose presenting in their EDs to the Canadian Institute for Health Information. Results are considered preliminary and subject to change as emergency departments continue to submit data. Rates are based on 2021 and 2022 population projections, and 2020 population estimates.

⁴ 2019 to 2022 suspect drug-related deaths are based on the Monthly Summary table provided by the Office of the Chief Coroner for Ontario, October 7, 2022. 2020-22 opioid-related death data are based on the Coroner's Opioid Investigative Aid, April 2021 to March 2022, Office of the Chief Coroner for Ontario, July 28, 2022. 2005 to 2021 ED visits, hospitalizations and deaths were obtained from Public Health Ontario's Interactive Opioid Tool. Opioid-related deaths include confirmed deaths only, are considered preliminary and are subject to change as remaining cases are closed by the Office of the Chief Coroner of Ontario.

Phone: 226.312.2023 ext. 2407; Email: lauraz@chatham-kent.ca #WeAreCKPublicHealth

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