OPIOID SURVEILLANCE BULLETIN

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



JULY 2024

This bulletin¹ 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 <u>Public Health Ontario's Interactive Opioid Tool</u> and the <u>Ontario Opioid Indicator Tool</u>.

EMERGING ISSUES & NEW RESOURCES

- Suspect opioid-related EMS calls remained high in June and have continued to be elevated over the month of July.
- > The unregulated drug supply is unpredictable and always changing. Share information with those at risk and sign up for alerts here from Toronto's Drug Checking Service.
- Check out upcoming webinar opportunities from Pozitive Pathways: https://www.pozitivepathways.com/prevention-education/.

CHATHAM-KENT ACTIVITY	
EMS Calls ²	 19 suspect opioid-related calls to CK EMS in June (100 to date in 2024; 75 in 2023) (Fig 1) 4 non-opioid drug-related calls to CK EMS in June (41 to date in 2024; 119 in 2023)
Emergency Department Visits ³	 14 opioid-related ED visits in June (58 to date in 2024 or 51.7 per 100,000; 96 in 2023 or 86.7 per 100,000 (some missing data Oct 2023 to Feb 2024)) (Fig 1)
Deaths ⁴	 1 suspect drug-related death in CK in June (29 to date in 2024 or 25.9 per 100,000; 28 deaths in 2023 or 25.3 per 100,000) (Fig 1) 8 confirmed/probable opioid poisoning deaths in CK between Jan and Mar 2024 (17 deaths in 2023 or 15.4 per 100,000; 37 deaths in 2022 or 33.9 per 100,000) (Fig 1)
OVERALL	 The number of opioid-related EMS calls and ED visits remained high in June and suspect drug deaths were fewer. In the first 6 months of 2024, there were more suspect drug deaths as all of 2023. CK males experience nearly 3x the number of opioid-related deaths as females, and nearly all deaths have been among those aged 25 to 64 years. Fentanyl directly contributes to nearly all accidental opioid-related deaths.

PROVINCIAL ACTIVITY	
Emergency Department Visits ³	 862 opioid poisoning-related ED visits in June (5691 to date in 2024 or 35.5 per 100,000; 13455 in 2023 or 86.3 per 100,000)
Deaths ⁴	 318 suspect drug-related deaths in June (1842 to date in 2024 or 11.5 per 100,000; 3812 in 2023 or 24.4 per 100,000) 607 confirmed/probable opioid poisoning deaths between Jan and Mar 2024 (2647 deaths in 2023 or 17.0 per 100,000; 2532 deaths in 2022 or 16.8 per 100,000)
OVERALL	 Suspect drug deaths in the past 3 months are increased from the 3 months prior and remain higher compared to the same time period in 2019.

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Figure 1. Opioid poisoning-related ED visits and EMS calls and suspect drug-related and opioid poisoning deaths (confirmed/probable) in Chatham-Kent, January 2020 to June 2024

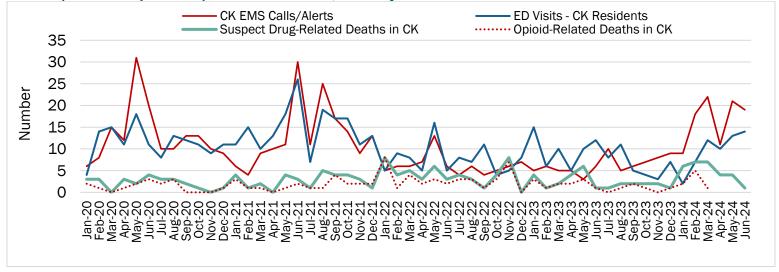
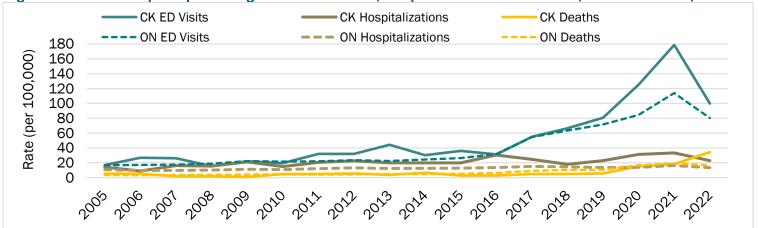


Figure 2. Rates⁴ of opioid poisoning-related ED visits, hospitalizations and deaths, Chatham-Kent, 2005-22



NOTES

¹Content and format of this information summary was originally adapted from Lambton Public Health

⁴ 2019 to 2024 suspect drug-related deaths and confirmed + probable opioid deaths are based on the Monthly Summary table provided by the Office of the Chief Coroner for Ontario, July 12, 2024. 2005 to 2022 ED visits, hospitalizations and deaths were obtained from Public Health Ontario's <u>Interactive Opioid Tool</u>; 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.

CONTACT:

Laura Zettler, Epidemiologist, CK Public Health

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

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² EMS calls up to and including June 2024 are based on calls for service by month provided by Chatham-Kent EMS for suspected opioid-related calls.

³ Emergency department visits were provided by the Ontario Ministry of Health and Long-Term Care (Weekly emergency department visits for opioid overdose Week 15: July 8-14, 2024). Ontario hospitals are required to report cases of opioid overdose presenting in their EDs to the Canadian Institute for Health Information. CK hospital visit data for October 2023 through January 2024 may still be incomplete due to the regional hospital cyber-attack in October 2023. Results are considered preliminary and subject to change as emergency departments continue to submit data. Rates are based on 2023-2024 population projections, and 2019-2022 population estimates.