Updated Suspected Drug Overdose Increases in Georgia Amid COVID-19

Sept. 8, 2020

On June 19, 2020, the Georgia Department of Public Health (DPH) disseminated a memo to statewide partners regarding suspected drug overdose increases identified through DPH syndromic surveillance (SS) and Vital Records, which appeared to overlap with the emergence of COVID-19. Key findings in that memo showed increases among seemingly unintentional drug overdose Emergency Department (ED) visits occurring from 3/22/2020 – 6/6/2020 that were opioid-involved (5.9% weekly average increase) and heroin-involved (6.4% weekly average increase).

Since then, updated data have shown continued increases in suspected drug overdose Emergency Department (ED) visits and deaths, particularly among those involving opioids. As these incidents have occurred in different areas of the state, DPH advises all partners to remain vigilant about any unusual drug overdose activity. Additionally, preliminary mortality data comparing a recent 5-month period (December 2019 – April 2020) to a previous 5-month period (July – November 2019) showed a 17.0% increase in fentanyl-involved overdose deaths. These death counts are expected to increase due to the lag in reporting of overdose deaths.

What is Syndromic Surveillance?
SS is a near-real time method of categorizing visits from emergency departments and urgent care facilities across Georgia into disease, illness or injury syndromes, which are based on a patient's chief complaint upon admission and/or discharge diagnoses. Participating hospitals across Georgia send these data to DPH daily. A drug overdose syndrome is identified by searching the patient's chief complaint for text indicative of a drugδ overdose, as well as by searching the patient's discharge diagnoses for relevant ICD codes. These data can be used as an early detection method for drug overdose outbreaks. DPH monitors these data results daily to look for unusually high numbers of drug overdoses at the state or local level. If an irregularity is detected, an investigation is conducted to determine if potential "bad batch(es)" of drugs are circulating, or any other unusual situation that could be driving increases warranting public health response.

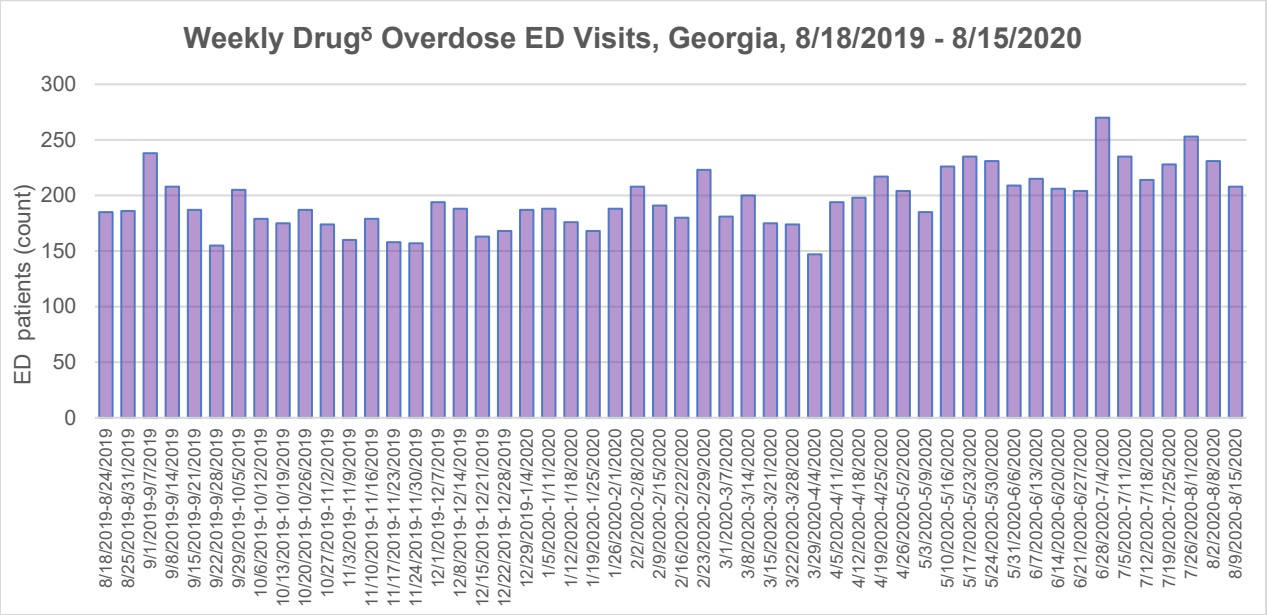
What are the limitations of Syndromic Surveillance?
Because SS is based on a patient's chief complaint upon admission and DPH does not receive diagnosis information from all participating facilities, the true nature of a patient's visit is not always known. For example, it may initially appear that a patient has overdosed, but they could receive a different diagnosis upon further medical examination. Furthermore, documentation of chief complaint can vary across facilities, so that text often contains limited details. It may also appear that certain patients are epidemiologically linked, but findings could change upon further review of medical records and patient circumstances. For these reasons, an increase or cluster picked up by syndromic surveillance is only a *SUSPECT* increase or cluster until further investigation is completed. More details about SS data limitations can be found here.

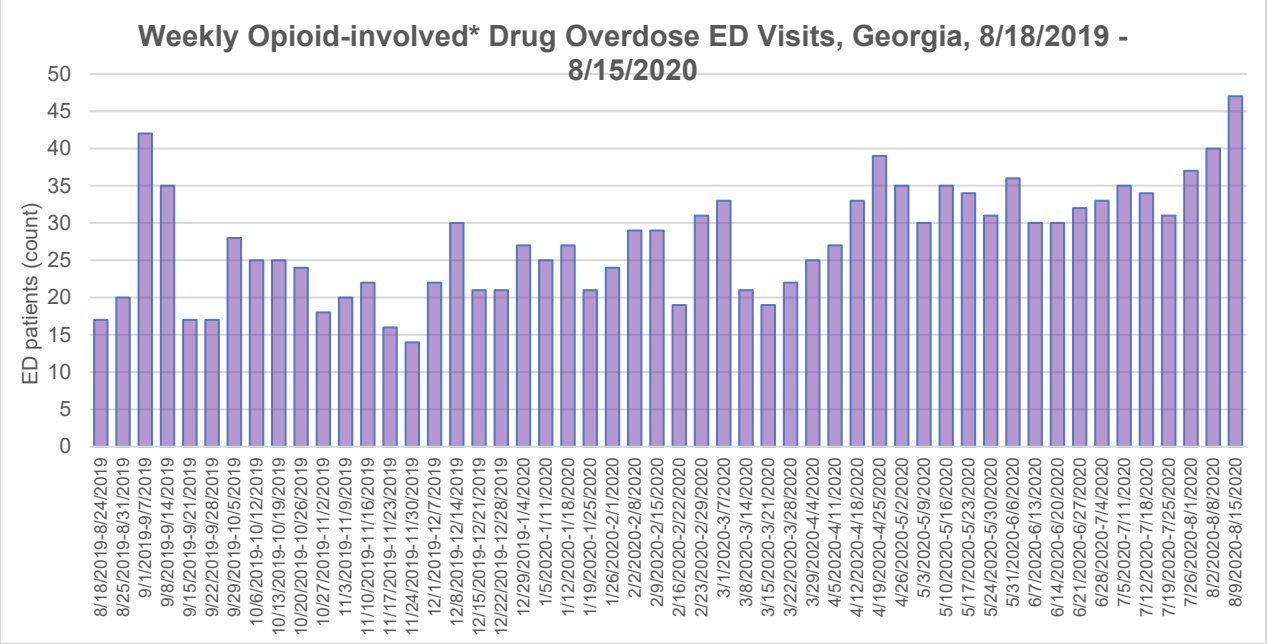
Updated Data Findings

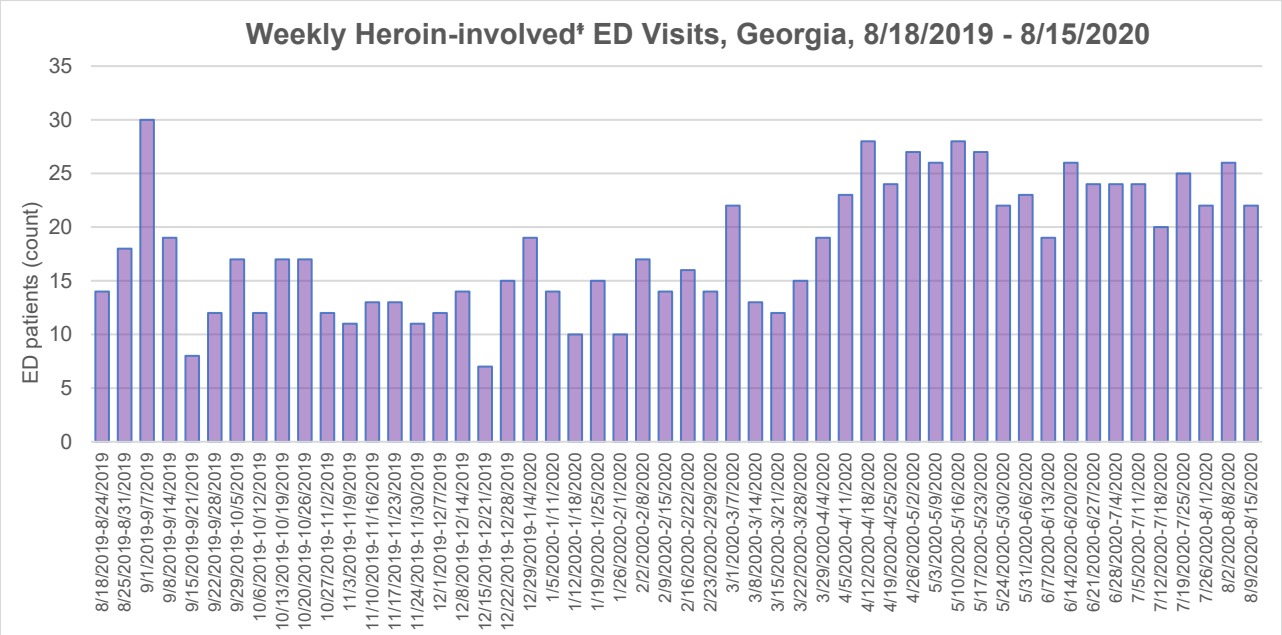
- Drug Overdose-involved ED Visits:

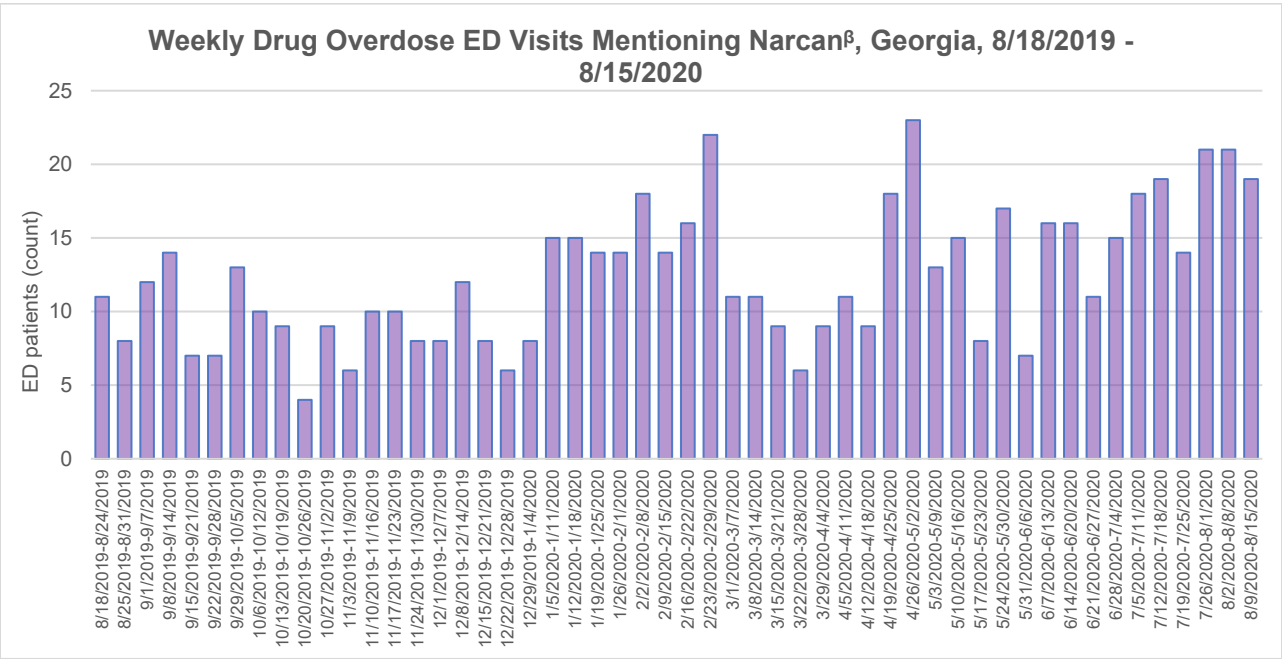
- From 3/15/2020 – 8/15/2020, SS identified an average weekly increase of 1.0% in ED visits with drug overdose syndrome. Of these visits, the following results were shown by drug type:
  Note: categories are not mutually exclusive.
  - 4.4% average weekly increase among opioid-involved* visits
    - Includes a highest weekly count for the past year
  - 3.7% average weekly increase among heroin-involved[ǂ] visits
    - Includes 4 weekly counts in the top 3 for the past year
  - 12.8% average weekly increase among visits mentioning Narcan[ß]
    - Includes a highest weekly count for the past year

Please see the charts and maps below for more information.

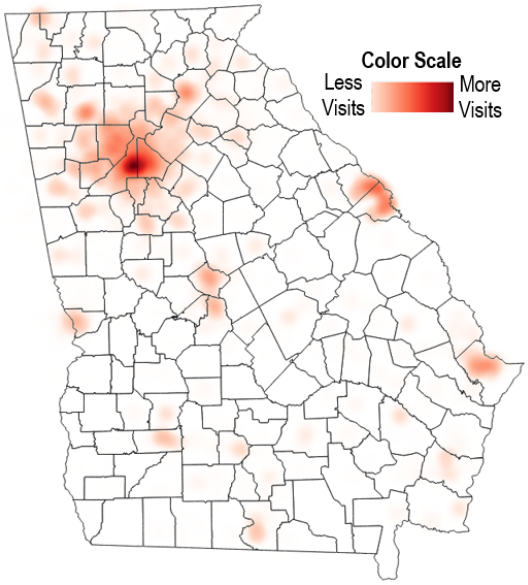




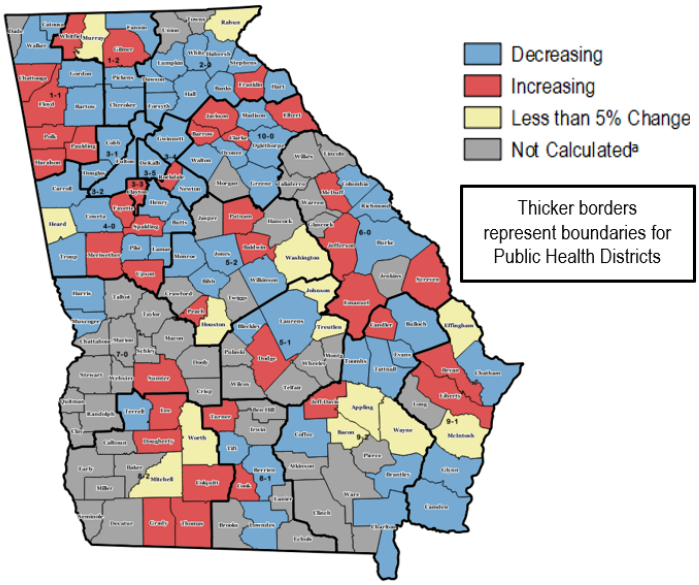

Weekly Heroin-involved[ɤ] ED Visits, Georgia, 8/18/2019 - 8/15/2020
ED patients (count)
0
5
10
15
20
25
30
35
8/18/2019-8/24/2019
8/25/2019-8/31/2019
9/1/2019-9/7/2019
9/8/2019-9/14/2019
9/15/2019-9/21/2019
9/22/2019-9/28/2019
9/29/2019-10/5/2019
10/6/2019-10/12/2019
10/13/2019-10/19/2019
10/20/2019-10/26/2019
10/27/2019-11/2/2019
11/3/2019-11/9/2019
11/10/2019-11/16/2019
11/17/2019-11/23/2019
11/24/2019-11/30/2019
12/1/2019-12/7/2019
12/8/2019-12/14/2019
12/15/2019-12/21/2019
12/22/2019-12/28/2019
12/29/2019-1/4/2020
1/5/2020-1/11/2020
1/12/2020-1/18/2020
1/19/2020-1/25/2020
1/26/2020-2/1/2020
2/2/2020-2/8/2020
2/9/2020-2/15/2020
2/16/2020-2/22/2020
2/23/2020-2/29/2020
3/1/2020-3/7/2020
3/8/2020-3/14/2020
3/15/2020-3/21/2020
3/22/2020-3/28/2020
3/29/2020-4/4/2020
4/5/2020-4/11/2020
4/12/2020-4/18/2020
4/19/2020-4/25/2020
4/26/2020-5/2/2020
5/3/2020-5/9/2020
5/10/2020-5/16/2020
5/17/2020-5/23/2020
5/24/2020-5/30/2020
5/31/2020-6/6/2020
6/7/2020-6/13/2020
6/14/2020-6/20/2020
6/21/2020-6/27/2020
6/28/2020-7/4/2020
7/5/2020-7/11/2020
7/12/2020-7/18/2020
7/19/2020-7/25/2020
7/26/2020-8/1/2020
8/2/2020-8/8/2020
8/9/2020-8/15/2020


Weekly Drug Overdose ED Visits Mentioning Narcanβ, Georgia, 8/18/2019 - 8/15/2020
ED patients (count)
0
5
10
15
20
25
8/18/2019-8/24/2019
8/25/2019-8/31/2019
9/1/2019-9/7/2019
9/8/2019-9/14/2019
9/15/2019-9/21/2019
9/22/2019-9/28/2019
9/29/2019-10/5/2019
10/6/2019-10/12/2019
10/13/2019-10/19/2019
10/20/2019-10/26/2019
10/27/2019-11/2/2019
11/3/2019-11/9/2019
11/10/2019-11/16/2019
11/17/2019-11/23/2019
11/24/2019-11/30/2019
12/1/2019-12/7/2019
12/8/2019-12/14/2019
12/15/2019-12/21/2019
12/22/2019-12/28/2019
12/29/2019-1/4/2020
1/5/2020-1/11/2020
1/12/2020-1/18/2020
1/19/2020-1/25/2020
1/26/2020-2/1/2020
2/2/2020-2/8/2020
2/9/2020-2/15/2020
2/16/2020-2/22/2020
2/23/2020-2/29/2020
3/1/2020-3/7/2020
3/8/2020-3/14/2020
3/15/2020-3/21/2020
3/22/2020-3/28/2020
3/29/2020-4/4/2020
4/5/2020-4/11/2020
4/12/2020-4/18/2020
4/19/2020-4/25/2020
4/26/2020-5/2/2020
5/3/2020-5/9/2020
5/10/2020-5/16/2020
5/17/2020-5/23/2020
5/24/2020-5/30/2020
5/31/2020-6/6/2020
6/7/2020-6/13/2020
6/14/2020-6/20/2020
6/21/2020-6/27/2020
6/28/2020-7/4/2020
7/5/2020-7/11/2020
7/12/2020-7/18/2020
7/19/2020-7/25/2020
7/26/2020-8/1/2020
8/2/2020-8/8/2020
8/9/2020-8/15/2020

Drug[δ] Overdose ED Visits by Patient Zip Code^, (3/15/2020 – 8/15/2020)

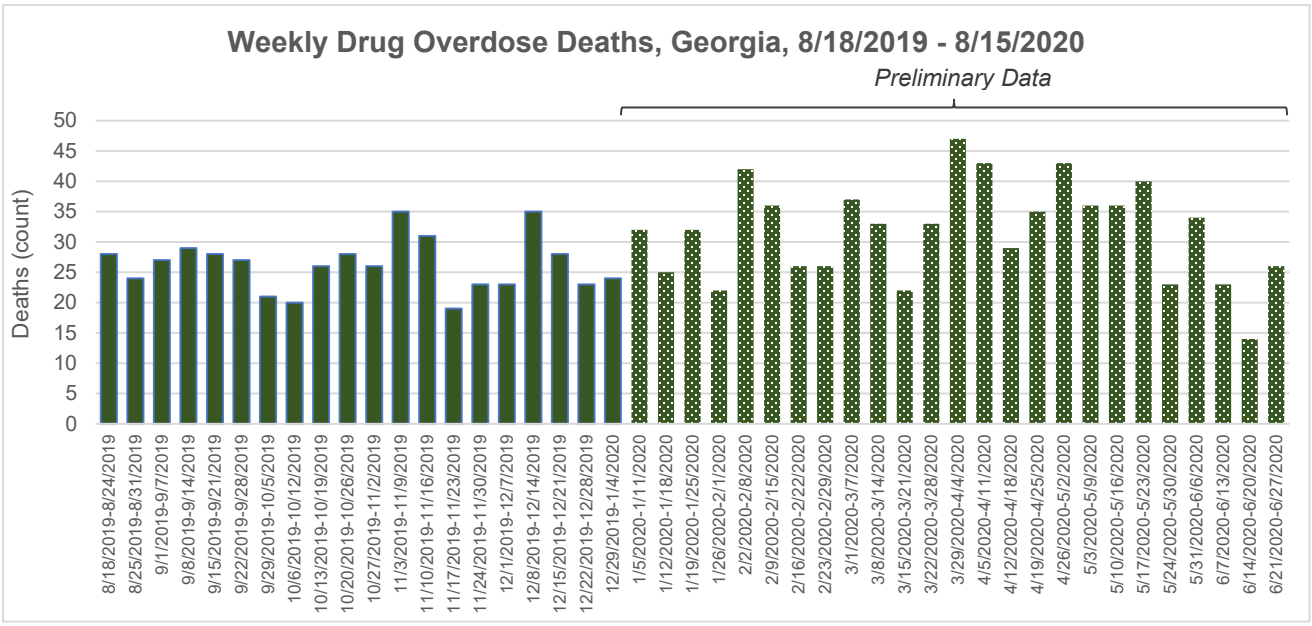


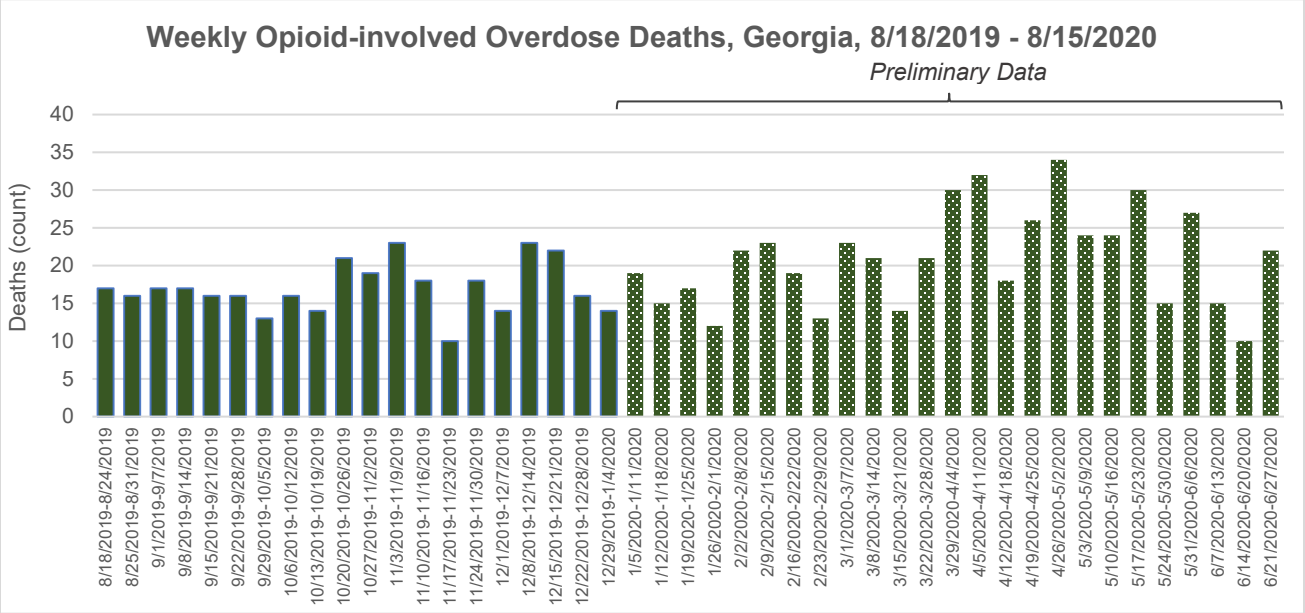
Percent Change[a] of Drug[δ] Overdose ED Visits by Patient County^, Current 22 Weeks (3/15/2020 – 8/15/2020) vs Previous 22 Weeks (10/13/2019 – 3/14/2020)



- Drug overdose-involved deaths:
  - Preliminary results for drug overdose deaths among Georgia residents showed the following percent change increases from the previous 15-week period (12/01/2019 – 3/14/2020) to the current 15-week period (3/15/2020 – 6/27/2020): *Note: categories are not mutually exclusive.*
    - 9.0% increase among all drug overdose deaths (444 to 484 deaths)
    - 25.3% increase among opioid-involved overdose deaths (273 to 342 deaths)
    - 32.3% increase among heroin-involved overdose deaths (93 to 123 deaths)
    - 61.4% increase among fentanyl-involved overdose deaths (140 to 226 deaths)

  Please see the charts and maps below for more information.




Weekly Opioid-involved Overdose Deaths, Georgia, 8/18/2019 - 8/15/2020
Preliminary Data
Deaths (count)
40
35
30
25
20
15
10
5
0
8/18/2019-8/24/2019
8/25/2019-8/31/2019
9/1/2019-9/7/2019
9/8/2019-9/14/2019
9/15/2019-9/21/2019
9/22/2019-9/28/2019
9/29/2019-10/5/2019
10/6/2019-10/12/2019
10/13/2019-10/19/2019
10/20/2019-10/26/2019
10/27/2019-11/2/2019
11/3/2019-11/9/2019
11/10/2019-11/16/2019
11/17/2019-11/23/2019
11/24/2019-11/30/2019
12/1/2019-12/7/2019
12/8/2019-12/14/2019
12/15/2019-12/21/2019
12/22/2019-12/28/2019
12/29/2019-1/4/2020
1/5/2020-1/11/2020
1/12/2020-1/18/2020
1/19/2020-1/25/2020
1/26/2020-2/1/2020
2/2/2020-2/8/2020
2/9/2020-2/15/2020
2/16/2020-2/22/2020
2/23/2020-2/29/2020
3/1/2020-3/7/2020
3/8/2020-3/14/2020
3/15/2020-3/21/2020
3/22/2020-3/28/2020
3/29/2020-4/4/2020
4/5/2020-4/11/2020
4/12/2020-4/18/2020
4/19/2020-4/25/2020
4/26/2020-5/2/2020
5/3/2020-5/9/2020
5/10/2020-5/16/2020
5/17/2020-5/23/2020
5/24/2020-5/30/2020
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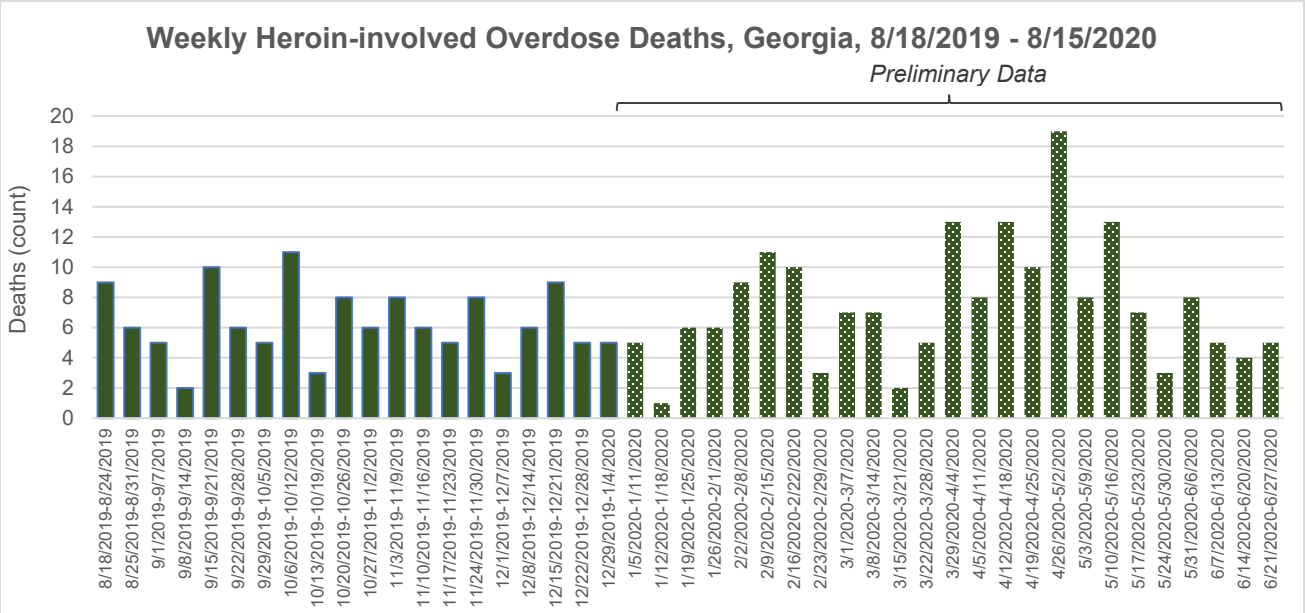
6/21/2020-6/27/2020


Weekly Heroin-involved Overdose Deaths, Georgia, 8/18/2019 - 8/15/2020
Preliminary Data
Deaths (count)
20
18
16
14
12
10
8
6
4
2
0
8/18/2019-8/24/2019
8/25/2019-8/31/2019
9/1/2019-9/7/2019
9/8/2019-9/14/2019
9/15/2019-9/21/2019
9/22/2019-9/28/2019
9/29/2019-10/5/2019
10/6/2019-10/12/2019
10/13/2019-10/19/2019
10/20/2019-10/26/2019
10/27/2019-11/2/2019
11/3/2019-11/9/2019
11/10/2019-11/16/2019
11/17/2019-11/23/2019
11/24/2019-11/30/2019
12/1/2019-12/7/2019
12/8/2019-12/14/2019
12/15/2019-12/21/2019
12/22/2019-12/28/2019
12/29/2019-1/4/2020
1/5/2020-1/11/2020
1/12/2020-1/18/2020
1/19/2020-1/25/2020
1/26/2020-2/1/2020
2/2/2020-2/8/2020
2/9/2020-2/15/2020
2/16/2020-2/22/2020
2/23/2020-2/29/2020
3/1/2020-3/7/2020
3/8/2020-3/14/2020
3/15/2020-3/21/2020
3/22/2020-3/28/2020
3/29/2020-4/4/2020
4/5/2020-4/11/2020
4/12/2020-4/18/2020
4/19/2020-4/25/2020
4/26/2020-5/2/2020
5/3/2020-5/9/2020
5/10/2020-5/16/2020
5/17/2020-5/23/2020
5/24/2020-5/30/2020
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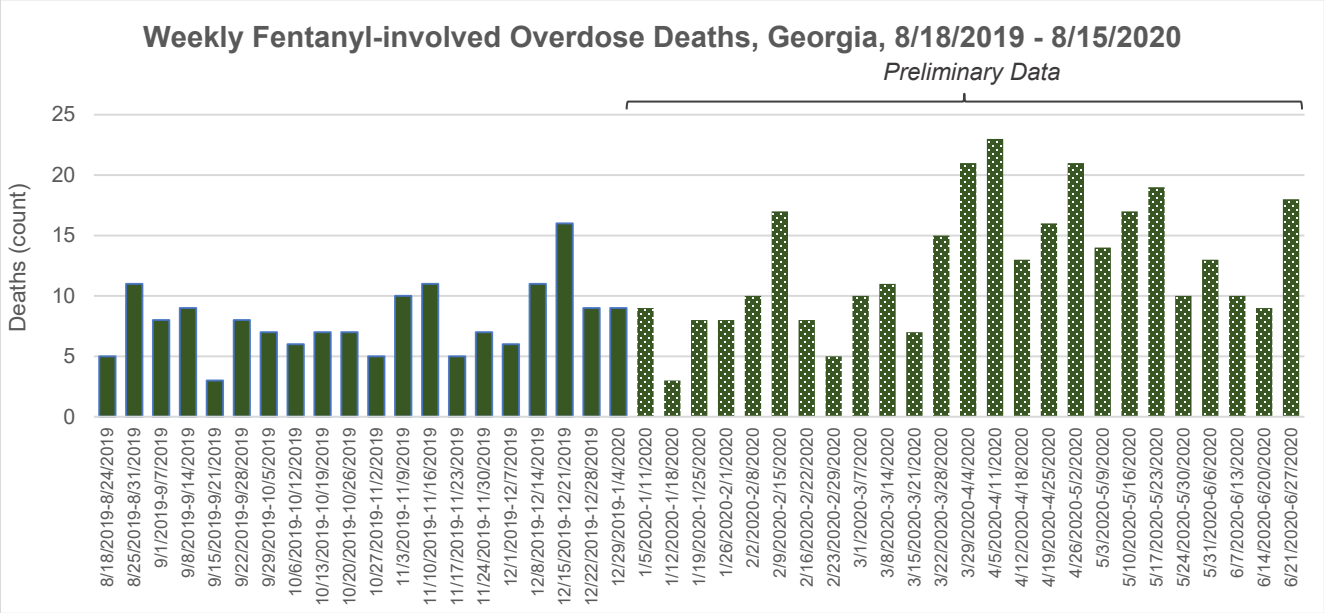
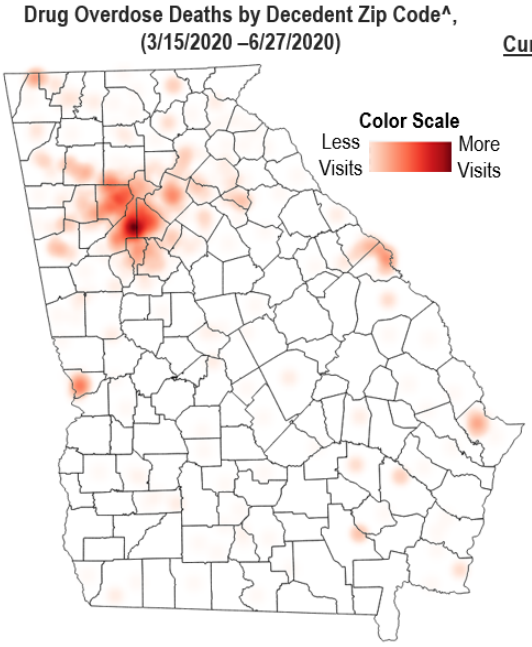
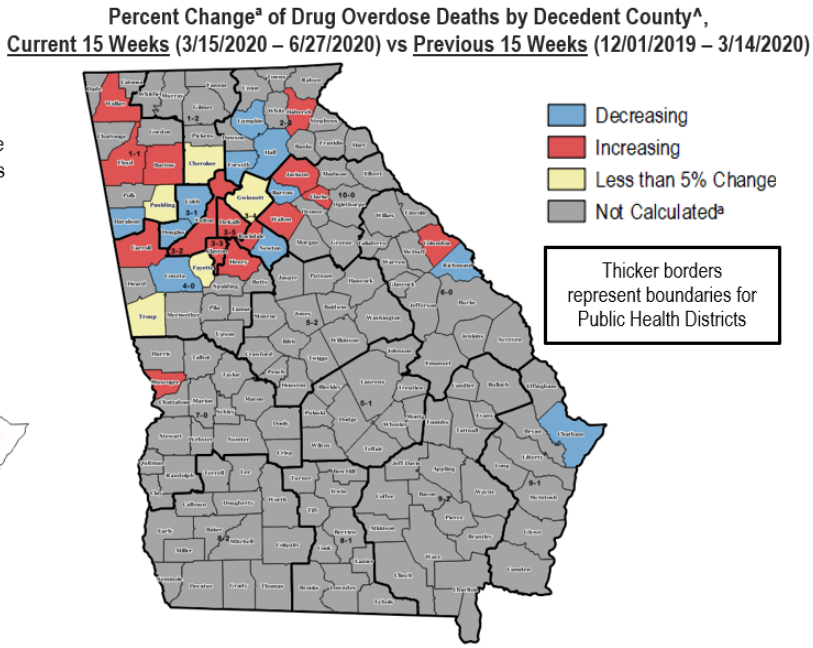
6/7/2020-6/13/2020
6/14/2020-6/20/2020
6/21/2020-6/27/2020







What do we do?

Because we are unsure of what could be driving these increases, we ask that you maintain normal operations but remain vigilant. If you notice any unusual activity or a possible rise in drug overdoses, please alert the Georgia Poison Center (1-866-PUB-HLTH) immediately. Once we are confident that there is a situation which warrants a robust public health response, we will notify additional partners and begin our overdose outbreak response protocols.

To be aware of available resources for people with substance use disorder, we also encourage engagement with your local substance use prevention and treatment professionals. For access to services and immediate crisis help, call the Georgia Crisis & Access Line at 1-800-715-4225,

available 24/7. For more information on overdose prevention and resources, please see https://dph.georgia.gov/stopopioidaddiction/opioid-epidemic-individuals-and-families.

Out of an abundance of caution, we encourage first responders to protect themselves with Personal Protective Equipment (PPE), and have access to Naloxone when responding to a potential overdose or when interacting with unknown substances. For guidelines on proper PPE and Naloxone please see https://dph.georgia.gov/stopopioidaddiction/opioid-epidemic-first-responders-and-ems.

Data sources: SS data is based on suspected drug overdose ED/Urgent Care visits by patient chief complaint upon admission and/or discharge diagnosis reported to DPH. SS data excludes patients ≤14 years of age and excludes select visits that appear unrelated to instances of accidental acute drug overdose (e.g. drug withdrawal, opioid-induced constipation, intentional overdose). Death data is based on DPH Vital Records death certificates for deaths that occurred in Georgia among Georgia residents and deaths that occurred outside of Georgia among Georgia residents. Please see surveillance reports here for death data case definitions.
ẟ Drugs may include any over the counter, prescription, or illicit drug.
*Includes drug overdose syndrome visits containing Opioids, Opiates, Heroin, Methadone, Suboxone, Oxycodone, Roxicodone, Percocet, Vicodin, Fentanyl, Hydrocodone, Morphine, Oxymorphone, Dilaudid, Hydromorphone, Tramadol, Kratom, or Buprenorphine.
ǂ Includes drug overdose syndrome visits containing Heroin or Morphine.
β Includes drug overdose syndrome visits containing Narcan, Naloxone, or Evzio.
^ Zip code and county are based on patient/decedent residence.
ª Percent change data excludes counties with less than 3 visits.