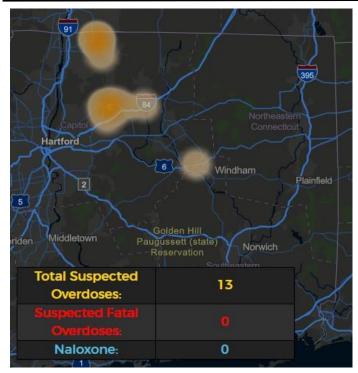


EMS SWORD

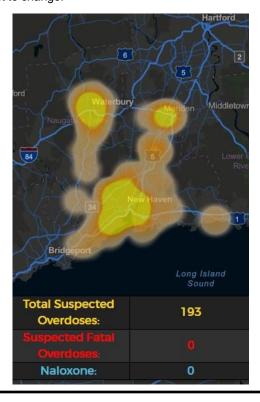
Statewide Opioid Reporting Directive Newsletter

Public Health

November 2024, Issue LXVI



In October of 2024, increased activity was reported in both Tolland (above), and New Haven County (below). Numbers are subject to change.



Continued Consistency in Data Trends with Automated Collection

The switch from manual reporting to the Connecticut Poison Control Center (CPCC) to automatic PCR downloads has enabled us a more complete view of overdoses statewide. Under the new reporting, we have been recording overdoses in an average of 129 zip codes a month (122 this October). This indicates that the program is successfully recording activity in roughly 20% more zip codes than were previously reported to the CPCC.

The data is entered into ODMAP, which can produce heat maps. These have been remarkably similar in each of the last three months. (See Figure 1). The most overdoses have been in New Haven, Hartford and Bridgeport, followed alternatingly by New Britain and Waterbury. West Haven, Bristol, Norwich, Middletown, New London, Meriden, Windham, Stratford, Hamden and Manchester have all appeared in the top ten towns in various months.

Tabulating data monthly, we can track trends. October was a bit unusual as the most overdoses occurred weekly between 8:00 PM Wednesday night into 8:00 PM Thursday night compared to past months when overdoses are usually highest Friday into Saturday.

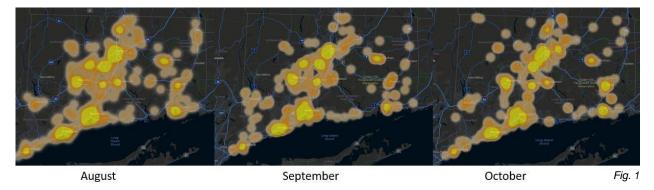
Males accounted for 72% of overdoses in October, which is typical. The most overdoses occurred in the age group 30-34 (76), followed closely by 40-44 (75) and 45-49 (75). Since July, the most overdoses have been in the age group 40-44 (361), followed by 35-39 (340), and 30-44 (361). During this time, there have been more overdoses in the 65-69 age group (142) than the 25-29 age group (129). (See Figure 2).

We looked in depth at suspected opioid overdoses in the 10-18 age group and found that many of the cases given naloxone were not opioid overdoses, but related to alcohol, marijuana, non-opioid prescription meds or other medical issues. When we looked at suspected opioid overdoses in the 80 and above age group, we found that many of the patients given naloxone for agonal breathing likely had other medical issues causing their distress, although one 85 plus patient did overdose on illicit fentanyl.

When we looked at patients aged 65+ who overdosed, nearly all were given naloxone appropriately and responded positively. 80% in this group overdosed on illicit opioids and 20% on prescription opioids.

Consistency in Data cont. from Page 1

Roughly half of overdoses occurred in residential settings (includes homes, SNFs (Skilled Nursing Facilities), prisons, and motels) as opposed to public locations. Patients in the 60-69 age group were much more likely to overdose at home than the general population.



Since April 51% of overdoses were white, followed by 26% black and 23% Hispanic/Latino when race was recorded. We are carefully monitoring this data. Earlier data has suggested increasing overdoses in the black community.

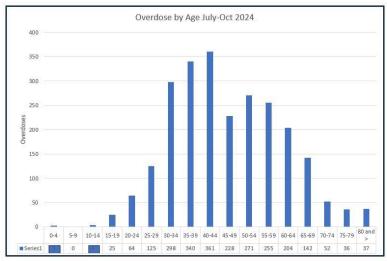
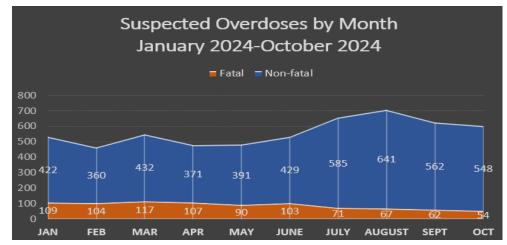


Fig. 2

While only half of the records record the number of doses of naloxone given each patient, we have found that 75% of patients needed only one dose of naloxone and 93% needed two or less. This data is important to help identify changes in the illicit drug supply. To date we have not found that more naloxone has been needed to combat newer synthetic opioids.

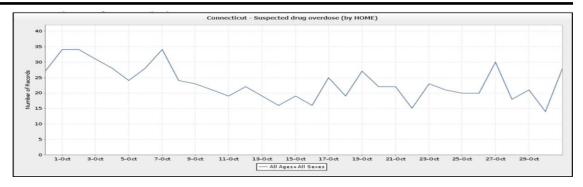
The data EMS reports is of great importance to state and local health agencies, and we appreciate the hard work EMS puts into their care efforts and documentation. You are valued partners.

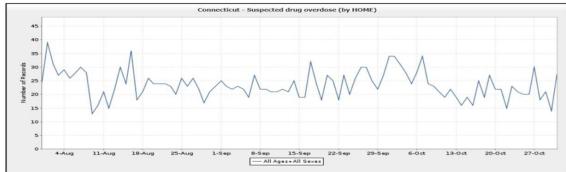


Suspected non-fatal overdose data is extracted from the ODMAP platform utilizing agency filter "Connecticut Dept. of Public Health, Office of EMS," and Connecticut Poison Control Center non-fatal data is extracted from the ODMAP platform utilizing agency filter "Connecticut Poison Control Center." Suspected fatal overdose data is extracted from ODMAP utilizing agency filter "Office of the Chief Medical Examiner Connecticut." All overdoses are suspected, and are not confirmed by laboratory findings. Numbers are subject to change as additional records are occasionally added month to month.

Right >: Suspected all overdoses by Day, October of 2024

Information sourced from EpiCenter system, November 2024.



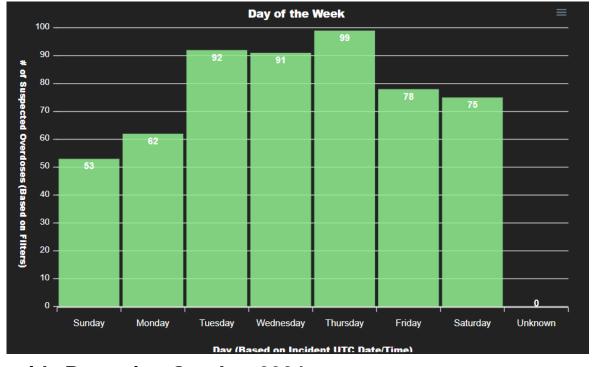


< Left: All overdoses by Day, August-October 2024.

Information sourced from EpiCenter system, November of 2024.

Right >: This graph represents EMS reported opioid overdoses by frequency of incident day during November 2024.

This graph was sourced from OD-MAP in November of 2024.



SWORD Statewide Reporting October 2024

In the month of October 2024, there were 548 non-fatal records submitted to DPH via EPCR (Electronic Patient Care Record) to the ImageTrend database for SWORD. Suspected non-fatal overdoses reported by EMS clinicians as follows: Fairfield County 86, Hartford County 174, Litchfield County <11, Middlesex County 12, New Haven County 193, New London County 48, Tolland County 13, Windham County 12.

In the month of October 2024, there were 54 fatal overdoses manually entered by the OCME into the ODMAP platform. Suspected fatal overdoses reported as follows: Fairfield County 11, Hartford County 14, Litchfield County zero, Middlesex County <11, New Haven County 16, New London County <11, Tolland County zero and Windham County <11.

^{*} Suspected fatal overdose data is entered into the ODMAP platform by the OCME, but it does not reflect laboratory confirmed data. The death data is for suspected opioid overdoses only.

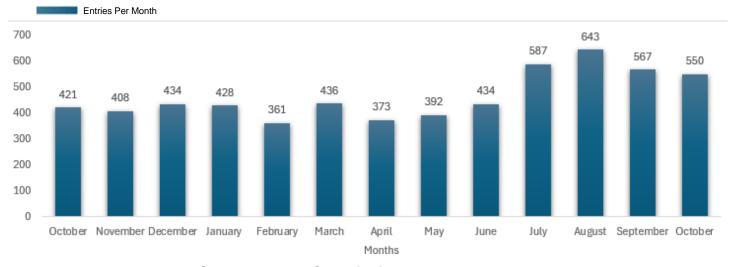
ODMAP Suspected Overdose Submissions - All Data Submitted



Cumulative (October 2023—October 2024) Overdoses by the Hour of the Day

This graph shows the hour of the day suspected overdose incidents

ODMAP Suspected Overdose Submissions - In the Last Year



ODMAP Suspected OD Submissions—In the Last Year by Month.

This data was pulled using agency filter Connecticut DPH, Office of EMS agency filter in October of 2024.
This data was provided to ODMAP via the SWORD API, all numbers are subject to change.

Do you need help accessing ODMAP Click here to contact the ODMAP Helpdesk, or call (301) 489-1744



Public Health

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Department of Public Health Office of Emergency Medical Services

Click here to contact OEMS regarding the SWORD program,

ODMAP, or feedback, <u>Click here</u> to check out the SWORD page on our website

Thank you for timely EPCR completion!