



February 29, 2024

Speakers

Ginger Dixon, ADHS Epidemiology Program Manager, Prevention Evaluation and Epidemiology Team

Maritza Valenzuela, ADHS Office Chief, Injury and Violence Prevention

Mercedeh Reamer, ADHS Opioid and Suicide Fatality Review Epidemiologist

Special thanks to Lubaba Tasnim, Opioid Surveillance Epidemiologist!

Agenda & Objectives

- To provide key indicators on the opioid epidemic in Arizona
- To describe potential opportunities for intervention to reduce opioid overdose and overdose deaths
- To highlight key opioid surveillance and fatality review strategies at the state level
- To share key strategies for translating surveillance and fatality review data to action

- Cross-Agency Effort
- State Opioid Response (SOR)
- Overdose Data to Action (OD2A)
- Successes

Speaker: Maritza Valenzuela, Office Chief, Injury and Violence Prevention

ADHS Opioid Prevention & Response

Bureau of Chronic Disease and Health Promotion

Office of Injury & Violence Prevention

Business
Intelligence
Office:
OD Surveillance

Bureau of Assessment and Evaluation: OD Surveillance

State Lab: OD Toxicology

Office of HIV and Hep C Services: Overdose and Disease Prevention Program (Syringe Services Programs)

Bureau of EMS and Trauma Services: Naloxone Leave-Behind

ADHS Opioid Prevention & Response

Strategy & Coordination

- Collaboration across state agencies
- Statewide Clinical Advisory Board
- ★Public Health & Public Safety Partnerships
- Overdose Fatality Review Teams
- SUD Treatment Capacity Reports

Data and Surveillance

- Fatal and Non-Fatal OD Surveillance
- Annual Reports and Prevention Recommendations

Clinical Engagement

- Opioid Assistance & Referral (OAR) Line
- ★ Peer Supports
- Rx Drug Monitoring
- Pain & Addiction Curriculum
- Linkages to Care / Treatment
 Engagement

Harm Reduction

- Targeted Naloxone Distribution
- Fentanyl Test Strips
- ★ Xylazine Test Strips
- Drug Deactivation Bags
- ★Drug-checking program

State Opioid Response

AHCCCS/SAMHSA (2022-2024):

- Statewide distribution of naloxone (Narcan), Fentanyl test strips, and DeTerra drug disposal bags
- State Overdose Fatality Review Team
- County Overdose Fatality Review Teams
- County Enhanced Case Management (Linkages to Care)

Overdose Data to Action in States (CDC) 2023-28

Strategy 1: Surveillance Infrastructure

Strategy 2: Morbidity Surveillance (Non-Fatal ODs)

Strategy 3: Mortality Surveillance (Fatal ODs)

Strategy 4: Biosurveillance (Toxicology of Non-Fatal ODs)

Strategy 5: Data Linkage

Strategy 6a: Clinician/Health System Engagement

Strategy 6b: Health IT/PDMP Enhancement

Strategy 7: Public Safety Partnerships/Interventions

Strategy 8: Harm Reduction

Strategy 9: Community-Based Linkage to Care

County Strategy Options

Successes

- New 5-Year Overdose Data to Action award from CDC (2023-2028) including two competitive strategies, Biosurveillance and Data Linkages
- Data Dashboards
- State and Local OFR Teams
- Significant increase in naloxone distribution partners this year– now 700+ recipients across the state
- Increased demand statewide and FY25 naloxone budget of \$6.5M
- Anti-stigma messaging and media

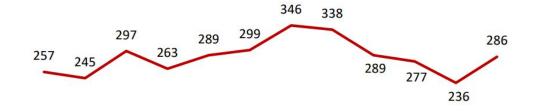
Highlights from 2022 data:

- Non-Fatal and Fatal Overdose by Sex, Age, and Race/Ethnicity
- Select Trends by Drug Type

Speaker: Ginger Dixon presenting data compiled by Lubaba Tasnim

Non-Fatal Overdose, 2022 (n=3,422)

The number of non-fatal opioid overdose events was relatively stable with a peak in the summer months

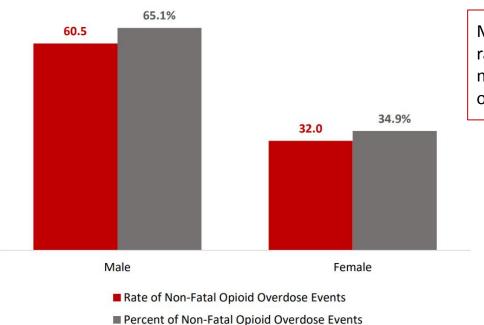




Non-Fatal Opioid Overdose Events

Data Source: MEDSIS

Rate & % Non-Fatal Overdose by Sex, 2022

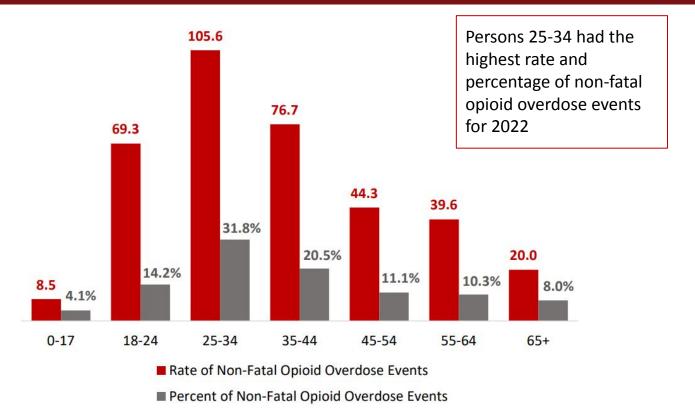


Males had the highest rate and percentage of non-fatal opioid overdose events for 2022

Arizona overall combined annual (2022) rate was 46.2 per 100,000 population.

Data Source: MEDSIS. Notes: Individuals with 'Unknown' sex (n=1; 0.03%) have been excluded from this graphic. 'Unknown' sex may include unidentified individuals.

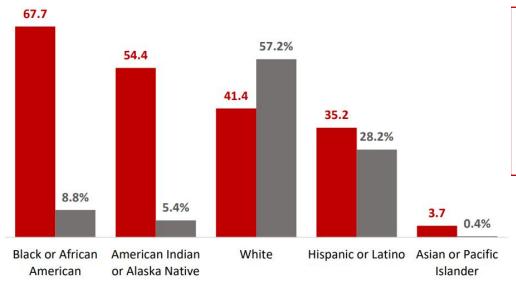
Rate & % Non-Fatal Overdose by Age, 2022



Arizona overall combined average annual (2022) rate was 46.2 per 100,000 population.

Data Source: MEDSIS. Notes: Individuals with 'Unknown' age (n=1; 0.03%) have been excluded from this graphic.

Rate & % Non-Fatal Overdose by Race/Ethnicity, 2022



Whites had a higher percentage of non-fatal opioid overdoses, whereas Black or African American individuals had the highest rate

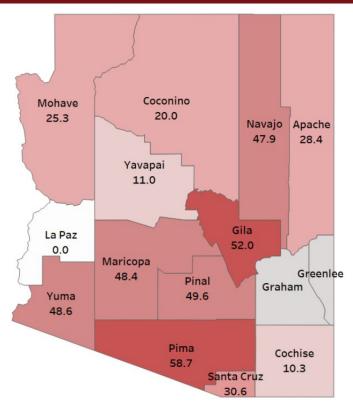
■ Rate of Non-Fatal Opioid Overdose Events

■ Percent of Non-Fatal Opioid Overdose Events

Arizona overall combined annual (2022) rate was 46.2 per 100,000 population.

Data Source: MEDSIS; Notes: Individuals with 'Unknown' Race and Ethnicity (n=444; 13.0%) and Other Race (n=31; 0.9%) have been excluded from this graphic.

Non-Fatal Overdose by County, 2022

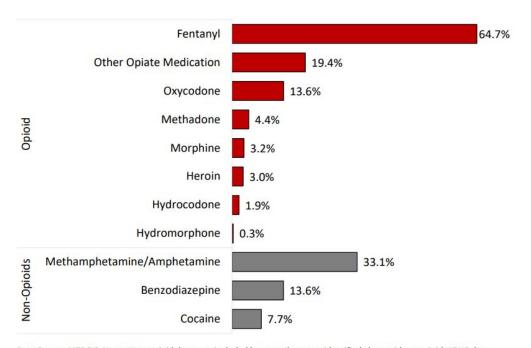


Pima, Gila, Pinal, Yuma, Maricopa, and Navajo County's rates were all higher than the state combined annual rate (46.2)

Arizona overall combined annual (2022) rate was 46.2 per 100,000 population.

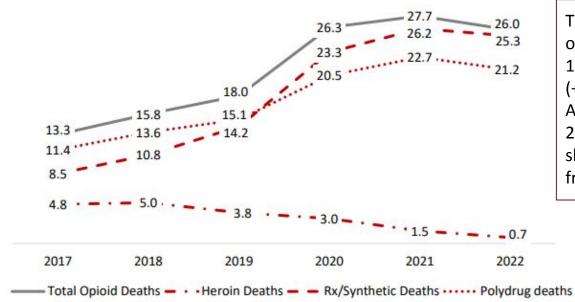
Data Source: MEDSIS. Notes: To prevent the public disclosure of personally identifying information, data points based on fewer than 10 counts are not displayed (indicated in gray). County reflects patient's county of residence. No non-fatal cases were reported for La Paz County.

Non-Fatal Overdose by Drug Type, 2022



Data Source: MEDSIS. Notes: Non-opioid drugs are included because they were identified along with an opioid. ADHS does not have a requirement for reporting any drug overdoses other than opioids (e.g., all methamphetamine overdoses that are happening in Arizona are not identified nor represented). The percentages do not add up to 100% as one overdose event may involve multiple drugs. The percentage indicates the proportion of overdose events in which the drug was identified.

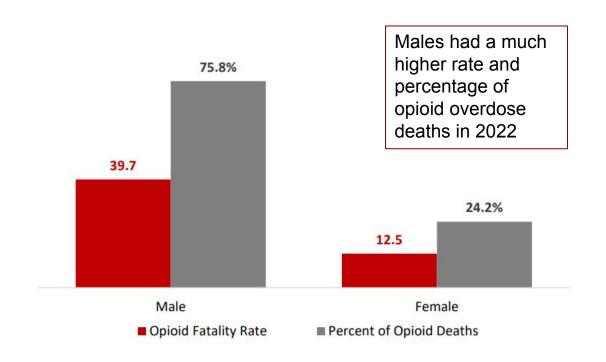
Opioid Overdose Deaths Rate, 2022



The rate of opioid overdose deaths per 100,000 increased (+108.3%) among Arizona residents from 2017-2021, with a slight decrease (-6.1%) from 2021 to 2022.

Data Source: Arizona Vital Statistics, Death Certificates. Notes - Heroin: Opioid deaths involving heroin (T40.1); Rx/Synthetic: Opioid deaths involving all "other opioids" except heroin (T40.2, T40.3, T40.4, and T40.6); Polydrug: Opioid deaths involving opioids in combination with other non-opioid substances. All polydrug deaths are also counted in either the Heroin or Rx/Synthetic Drug Category.

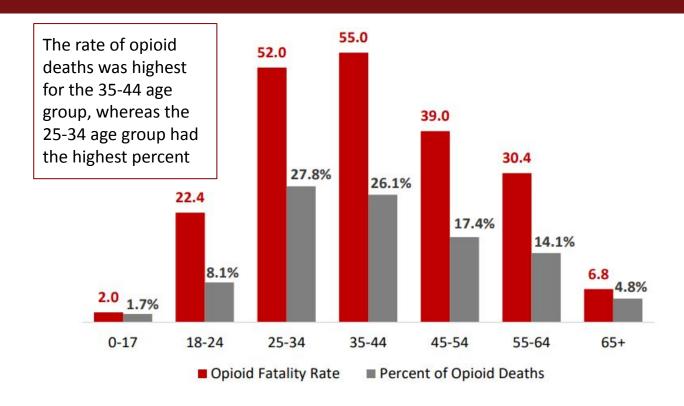
Rate & % Fatal Overdose by Sex, 2022



Arizona overall combined annual 2022 was 26.0 per 100,000.

Data Source: Arizona Vital Statistics, Death Certificates. Notes: There were no missing data for Sex.

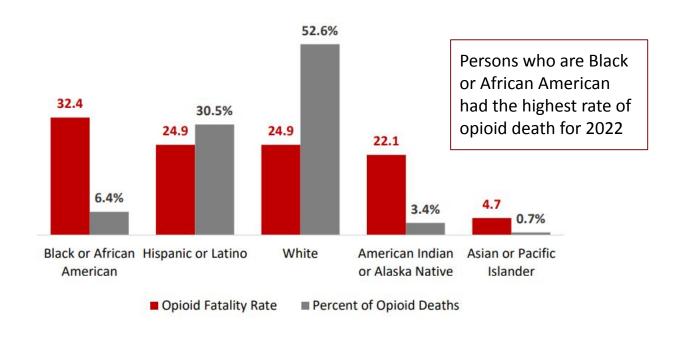
Rate & % Fatal Overdose by Age, 2022



Arizona overall combined annual 2022 was 26.0 per 100,000.

Data Source: Arizona Vital Statistics, Death Certificates. Notes: There were no missing data for Age Group.

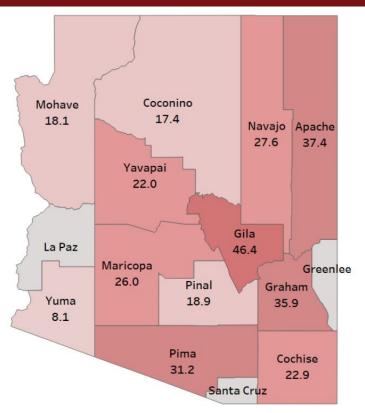
Rate & % Fatal Overdose by Race/Ethnicity, 2022



Arizona overall combined annual 2022 was 26.0 per 100,000.

Data Source: Arizona Vital Statistics, Death Certificates. Notes: There were no missing data for Race/Ethnicity. 'Unknown' and 'Other Race' categories are not shown here.

Fatal Overdose Rate by County, 2022



The rate of opioid overdose deaths was highest in Gila, Apache, Graham, and Pima Counties in 2022

Data Source: Arizona Vital Statistics, Death Certificates. Notes: To prevent the public disclosure of personally identifying information, data points based on fewer than 10 counts are not displayed (indicated in gray). County reflects person place of residence.

Visit Our Dashboards



Highlights from 2021:

- Primary/Contributing Drugs
- Contributing Factors
- > ACEs
- Recommendations

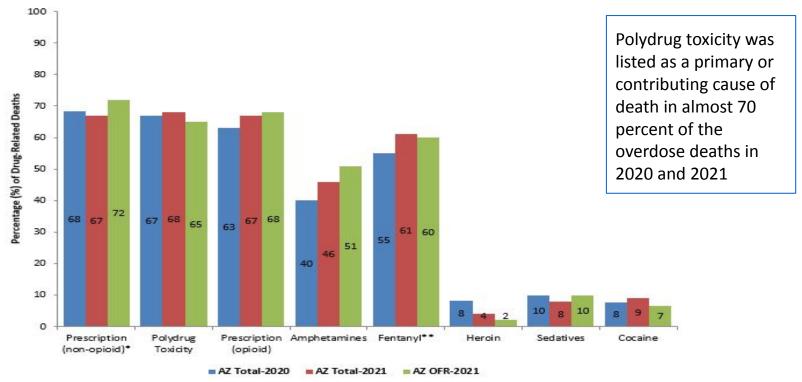
Speaker: Mercedeh Reamer, Senior Epidemiologist

What is the Overdose Fatality Review (OFR)?

The mission of the Overdose Fatality Review (OFR) Program is to reduce preventable drug overdose fatalities through systematic, multidisciplinary, and multimodality review of drug overdose fatalities in Arizona

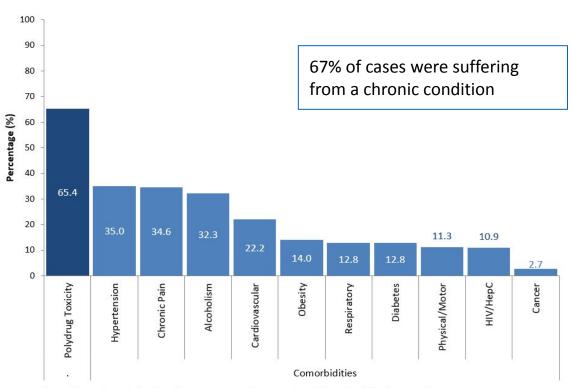
- Overdose case records are collected for each individual
- Each case is reviewed individually allowing the team to provide prevention recommendations
- Case data are analyzed and prevention recommendations summarized for the annual state OFR report

Drugs Identified as Primary/Contributing Cause of Death



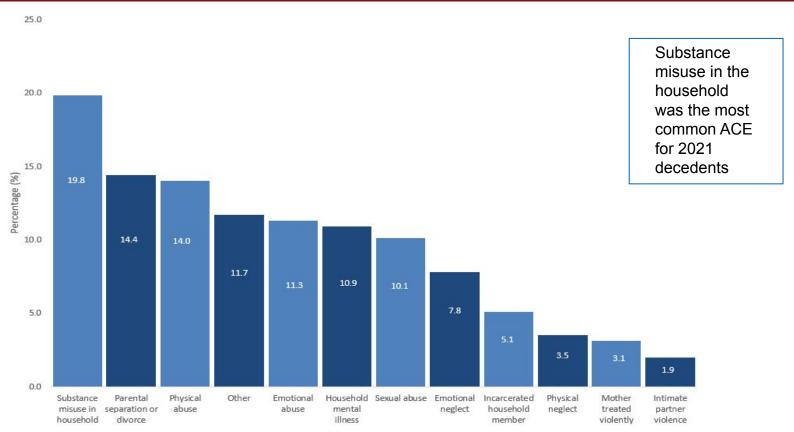
^{*}Prescription (non-opioid) drugs include antidepressants, corticosteroids, gabapentin, etc. **There was no specific ICD-10 code for fentanyl until October 2020; estimates approximated using cause of death text

Contributing Factors and Comorbidities



^{*}Any comorbid conditions also include other diseases and conditions prevalence in less than 5% of cases reviewed (e.g., disability, hepatitis, limited independence, unspecified) not specifically parsed out or presented above

Adverse Childhood Experiences (ACEs)



Prevention Recommendations

- 846 Recommendations among 267 cases
- Categories:
 - Healthcare
 - Criminal Justice
 - Crisis Response
 - Community/Public Health
 - Fatality Review (process)

Top Prevention Recommendations

Healthcare

- Increase patient-specific education of overdose risk associated with age, comorbid conditions, prescription medications, and the use of other substances (13%)
- Improve access to primary care services that include substance use disorder screening, harm reduction education, Medication Assisted Treatment, and referral to treatment (9%)
- Enhance capacity and coverage of mental health services (e.g., long-term case management) (8%)

Criminal Justice

 Improve care coordination post-release by performing a warm hand-off to substance use disorder treatment, medical care, and mental health services, as well as providing social support resources such as housing, employment, insurance, transportation, etc. (4%)

Top Prevention Recommendations

Crisis Response

• Improve care coordination by connecting to mental health and substance use services (e.g., transport/referral to treatment) (3%)

Community/Public Health

- Increase education and awareness of overdose prevention and harm reduction strategies (e.g., naloxone, fentanyl test strips, HIV/Hep C testing) (15%)
- Improve support for families who have a loved one with a substance use disorder (e.g., community events, connection to support groups, written materials) (11%)
- Improve support for individuals with past childhood or adult trauma (e.g., domestic violence, sexual assault, loss of a loved one) (7%)

Fatality Review

 Recruit new members to offer valuable insights at the community, system, or policy level (1%)

- > Fentanyl is driving majority of the non-fatal and fatal opioid overdoses in Arizona
- Opioid fatality rates were highest among males, individuals ages 35 to 44, and Black or African American population
- The Overdose Fatality Review continues to provide in-depth data on overdose deaths to aid in prevention

Thank you for joining us!

Questions?

Contact:

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Visit www.azdhs.gov/opioid

