

Prescription & Drug Overdoses

An epidemic of unintentional poisoning deaths continues to affect North Carolina. Since 1999, the number of these deaths has increased by more than 391 percent, from 279 to 1,370 in 2015 (Fig. 1). The vast majority of unintentional deaths are drug or medication-related, occurring when people misuse or abuse these drugs (Fig. 2). In particular, opioid analgesic deaths involving medications such as methadone, oxycodone, and hydrocodone have increased significantly in North Carolina. Opioid analgesics are involved in more drug deaths than cocaine and heroin combined but that seems to be changing rapidly (Fig. 3).

Figure 1: Poisoning Deaths by Intent: N.C. Residents, 1999-2015

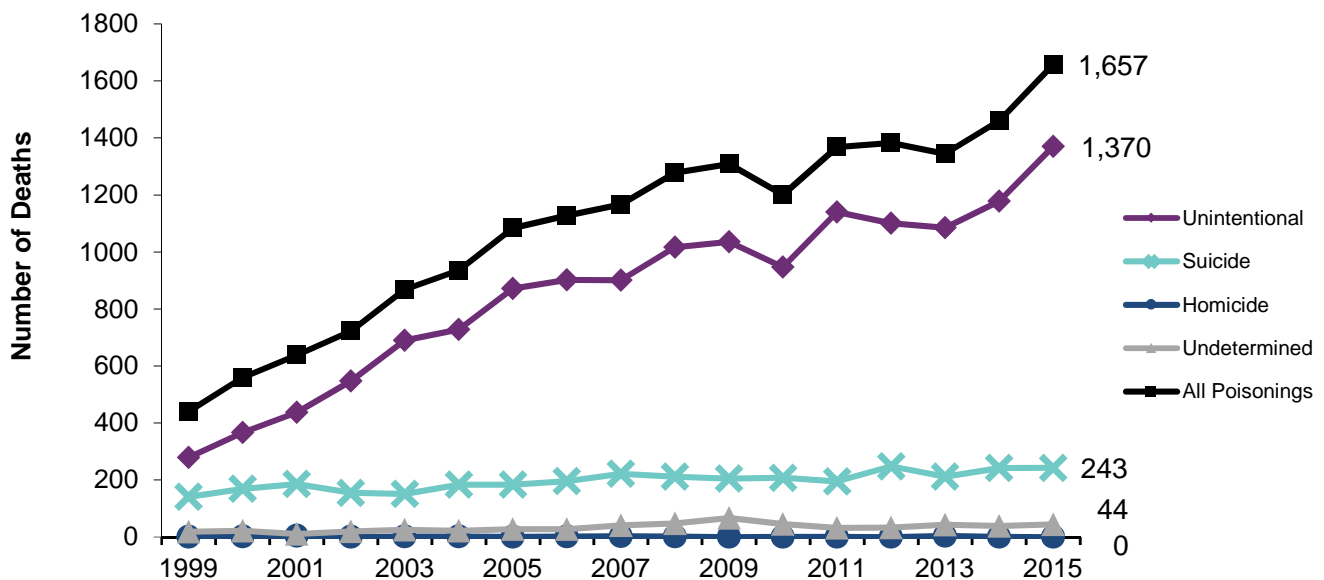
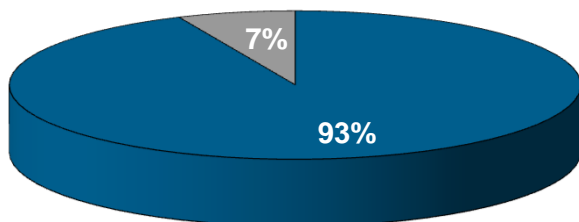


Figure 2: Medication/Drug vs Non-Medication Types of Unintentional Poisonings: N.C. Residents, 2015

Of these unintentional poisoning deaths, 92.6 percent are caused by drugs and medications (over-the-counter, prescription and illicit) (Fig. 2). Seven percent are toxins or chemicals (non-medication/non-drug).



Medication/Drug	93%
Opioids/Cocaine	47%
Other/Unspecified drugs	43%
Anti-epileptic and sedative-hypnotic drugs	2%
Non-opioid	1%

Prescription opioid analgesics, heroin and cocaine are the cause of death in nearly half (47 percent) of these poisoning deaths (Fig. 2).

Table 1: N.C. Unintentional Poisoning Death Demographics, 2015

	Number	Percent	Rate
Sex			
Female	500	36.5%	9.7
Male	870	63.5%	17.8
Race			
American Indian	20	1.5%	12.0
Asian	2	0.1%	**
Black	175	12.8%	7.6
White	1146	83.6%	15.8
Other/Unknown	27	2.0%	NA
Age Group			
0-14	2	0.1%	**
15-24	118	8.6%	8.5
25-34	311	22.7%	23.8
35-44	317	23.1%	24.5
45-54	378	27.6%	27.5
55-64	185	13.5%	14.6
65-84	54	3.9%	4.0
>84	5	0.4%	2.9

Males are dying in greater numbers than females (870 versus 500) (Table 1).

Whites and American Indians have the highest rates of unintentional poisoning deaths (15.8 and 12.0 per 100,000 persons) among state residents (Table 1).

Unintentional poison death rates increase with age, peaking between the ages of 45-54 (27.5 per 100,000 persons), and then decreasing after age 55 (Table 1).

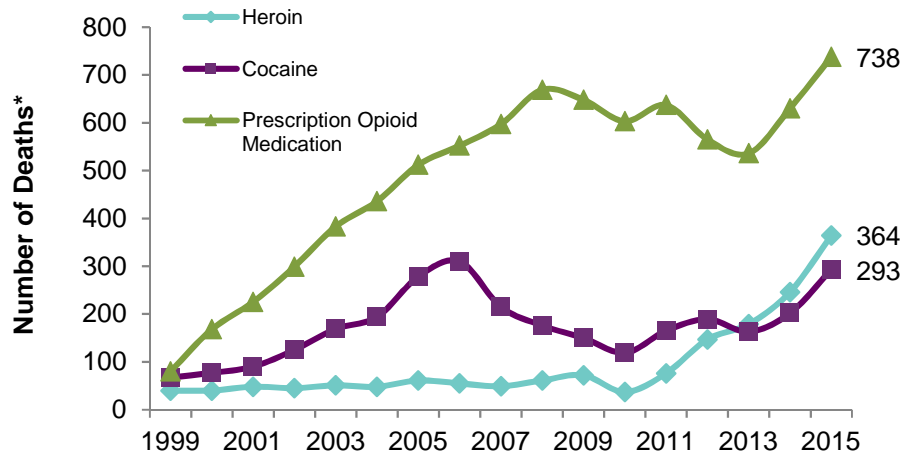
**Indicates <5 deaths; rates are not reported

Figure 3: Unintentional Prescription Opioid and Drug Overdose Deaths by Year: N.C. Residents, 1999-2015

Prescription opioid pain medications include such drugs as oxycodone, hydrocodone and methadone.

Prescription opioid pain medications are responsible for more deaths than heroin and cocaine combined (Fig. 3).

If current trends continue, unintentional poisoning deaths will surpass motor vehicle deaths as the leading cause of injury death in North Carolina by 2017.



* Number of times mentioned- Cases are not mutually exclusive- Deaths can have more than one drug.

Key Organizations Working to Reduce Prescription and Drug Overdose in North Carolina

Organization

- N.C. Medical Board (NCMB)
- N.C. Board of Pharmacy
- Controlled Substance Reporting System (CSRS)
- Project Lazarus, Inc. Wilkes County
- Operation Medicine Drop
- Carolinas Poison Center
- Injury Prevention Research Center (IPRC), UNC-CH
- N.C. Injury & Violence Prevention Branch
- Governor's Institute
- North Carolina Harm Reduction Coalition
- Office of the Chief Medical Examiner (OCME)

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