2018 Chicago Opioid Overdose Data Brief



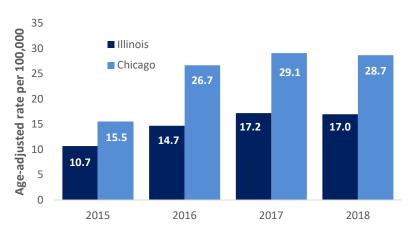
Overview

- In Chicago in 2018, **793** people died from an opioid-related overdose (Cook County Medical Examiner's Office).
- From 2017 to 2018, the overall opioid-related overdose death rate **decreased by 1.4%.** Although this rate remains higher than in the rest of Illinois, this change marks the **first time since 2015** that the rate has declined in Chicago.
- For the first time, in 2018, the number of **fentanyl-involved deaths surpassed heroin-involved deaths.** About 80% of opioid-related overdose deaths involved fentanyl and another opioid. More than 25% of deaths involved fentanyl only.
- In 2018 in Chicago, opioid-related overdose death rates remained highest among men; non-Hispanic blacks/African Americans; adults age 55-64; and persons living in communities experiencing high economic hardship.
- Emergency medical services (EMS) teams responded to 8,359 opioid-related overdoses in 2018 – an average of 23 per day (Chicago Fire Department Emergency Medical Services).

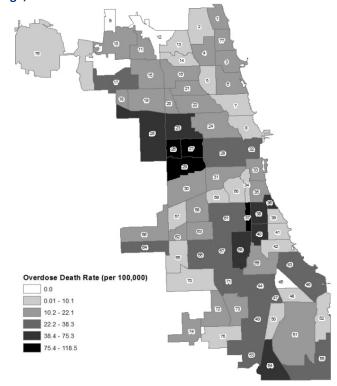
Where do opioid-related overdose deaths occur?

- Chicago residents who died from an opioid-related overdose in 2018 lived across the city. Ninety-six percent of Chicago's community areas were home to at least one resident with a fatal opioid-related overdose.
- The community areas with the most opioid-related overdose deaths in 2018 were Austin (n=65), Humboldt Park (n=40), and North Lawndale (n=31). Only three community areas had zero deaths: Edison Park, Forest Glen and Avalon Park.
- In 2018, EMS responded to opioid overdoses in all 77 community areas, most frequently in Austin (n=1,010),
 Humboldt Park (n=864), and West Garfield Park (n=745).

Overdose deaths involving opioids - Chicago, 2015-2018



Rate of overdose deaths involving opioids by community area – Chicago, 2018



What types of opioids are involved in opioid-related deaths?

- In 2018, **3.2**% of Chicago adults reported **prescription opioid pain reliever misuse** (Healthy Chicago Survey). Also in 2018, **67 opioid-related overdose deaths were linked to prescription opioid pain relievers,** most commonly used with illicit (heroin, fentanyl) opioids. This remains much less common than overdose deaths linked to illicit opioids. In fact, there were 15 opioid pain reliever—only deaths in 2018.
- The rate of deaths involving fentanyl increased by 733% from 2015 to 2018. The presence of fentanyl in the Chicago opioid supply continues to add complexity to addressing the opioid epidemic. Further investigation is needed to better understand fentanyl's role in the market and its introduction into non-opioid illicit substances, like cocaine.

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OPIOID-RELATED OVERDOSE MORTALITY: A Detailed Table

- From 2017 to 2018 the rate of opioid-related overdose death <u>increased</u> for fentanyl-involved and fentanyl-only overdoses, while rates decreased for heroin-involved overdoses and opioid pain-reliever involved overdoses.
- From 2017 to 2018 the rate of opioid-related overdose death <u>increased</u> among non-Hispanic African Americans, Latinx individuals, people 55 and older, and people in high economic hardship communities, while rates <u>decreased</u> among non-Hispanic Whites, adults age 35-54, and people in low or medium economic hardship communities.

Table 1. Overdose deaths involving opioids – Chicago, 2017-2018 (Cook County Medical Examiner's Office)

	2017			2018			2017 to 2018	
			_ ::			_ ::	Absolute	% change
	n	%	Rate ⁱⁱ	n	%	Rate ⁱⁱ	rate change	in rate
Chicago	796	100%	29.1	793	100%	28.7	-0.4	-1.4
Drug Type ⁱ								
Heroin-involved	575	71.9	21.0	520	65.6	18.9	-2.1	-10.0
Fentanyl-involved	470	58.7	17.1	620	78.2	22.5	5.4	31.6
Fentanyl -only	145	18.2	5.2	212	26.7	7.6	2.4	46.2
Opioid pain reliever-involved ⁱⁱⁱ	86	10.8	3.2	67	8.4	2.5	-0.7	-21.9
Methadone-involved	68	8.5	2.6	69	8.7	2.6	0	0.0
Gender								
Male	615	77.3	46.2	612	77.2	46.6	0.4	0.9
Female	179	22.5	13	181	22.8	12.9	-0.1	-0.8
Race-Ethnicity ^{iv}								
NH Black or African American	403	50.7	43.6	425	53.6	45.5	1.9	4.4
NH White	293	36.8	29.7	244	30.8	24.6	-5.1	-17.2
Latinx	96	12	13.3	121	15.3	15.8	2.5	18.8
NH Asian or Pacific Islander	0	0	0	3	0.38	1.9^	1.9	-
Age (years) ^v								
0-14	0	0	0	1	0.1	0.02^	0.02	-
15-24	34	4.3	8.4	38	4.8	9.4	1	11.9
25-34	132	16.6	25.6	135	17.0	26.2	0.6	2.3
35-44	155	19.5	41	152	19.1	40.2	-0.8	-2.0
45-54	249	31.4	73.5	224	28.2	66.1	-7.4	-10.1
55-64	186	23.4	70.8	202	25.4	76.9	6.1	8.6
65-74	35	4.4	23.2	39	4.9	25.8	2.6	11.2
75+	3	0.4	0.2^	0	0	0	-0.2	
Economic Hardship in Community Area of								
Occurrence ^{vi}								
Low	210	26.6	18.4	204	25.7	17.9	-0.5	-2.7
Medium	197	25	25.2	143	18.0	18	-7.2	-28.6
High	381	48.4	45.6	431	54.2	51.2	5.6	12.3

Indicates a decrease in rate from 2017 to 2018

Indicates an increase in rate from 2017 to 2018

Note: NH = Non-Hispanic. Numbers include all opioid-related overdose deaths that occurred in Chicago, regardless of decedent's address of residence.



ⁱ Categories are not mutually exclusive as some deaths involved more than one type of opioid.

Rates are expressed as number of overdoses per 100,000 people in the population. Denominators are based on the 2010 census. Rates are age-adjusted to the 2000 US standard population

iii Opioid pain reliever: buprenorphine, codeine, hydrocodone, hydromorphone, meperidine, morphine, oxycodone, oxymorphone, or tramadol. Opioid pain reliever- involved deaths may also have involved other substances including heroin, fentanyl, or cocaine.

^w The Cook County Medical Examiner's office assigns race and ethnicity classifications based on information from the funeral home as well as clarification and communication with the decedent's family (when possible).

 $^{^{\}rm v}\,2017$ and 2018 two deaths were missing data for age.

vi Montiel L, et al. An Update on Urban Hardship. Rockefeller Institute of Govt. August 2004. 2014 5-Year ACS data was used to calculate Neighborhood Economic Hardship at the community area level.

[^] For counts less than 20, rates may be unstable and should be interpreted with caution.