



New Hampshire Drug Monitoring Initiative

New Hampshire Information & Analysis Center

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NHIAC Product #: 2016-2489

January 2016 Report

26 February 2016

Purpose: The NH Drug Monitoring Initiative (DMI) is a holistic strategy to provide awareness and combat drug distribution and abuse. In line with this approach the DMI will obtain data from various sources (to include, but not limited to, Public Health, Law Enforcement, and EMS) and provide monthly products for stakeholders as well as situational awareness releases as needed.

Drug Environment Report—UNCLASSIFIED

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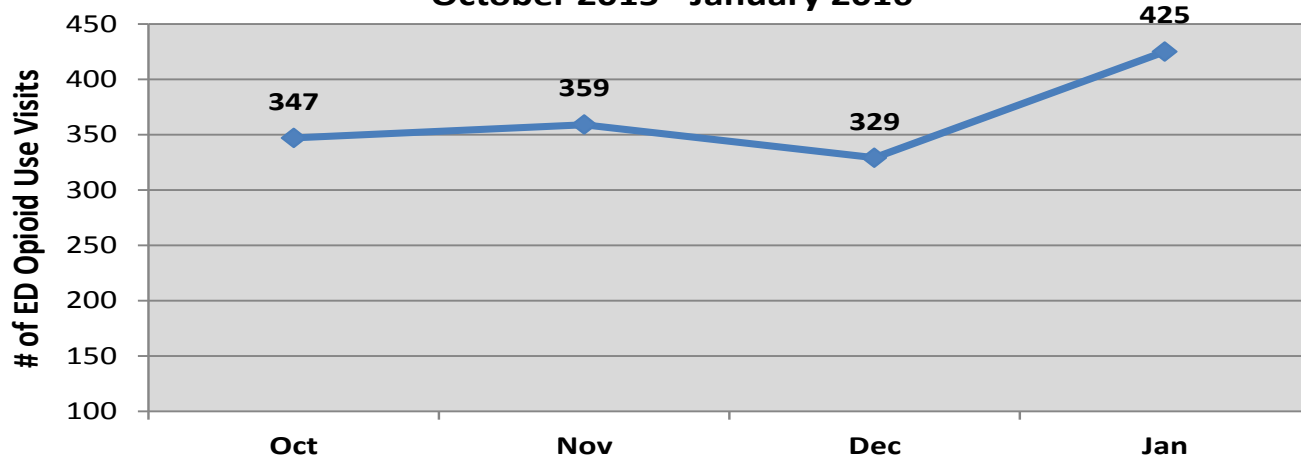
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Opioid Related Emergency Department Visits**Data Source: NH Division of Public Health Services*

IMPORTANT NOTE— Data Source Change!!! Beginning with this edition of the UNCLASSIFIED DMI the data query for ER visits has been revised. The ER visit data has been expanded beyond heroin to include all opioids. Also in addition to a query of the chief complaint text, the Division of Public Health is conducting queries on ICD-10 diagnostic codes designated for heroin and opioids. This results in an apparent increase in the number of ER visits, which is NOT necessarily indicative of an actual increase, but rather due to a more representative way of tracking the information as a result of the switch from ICD-9 codes to ICD-10 codes beginning in October of 2015.

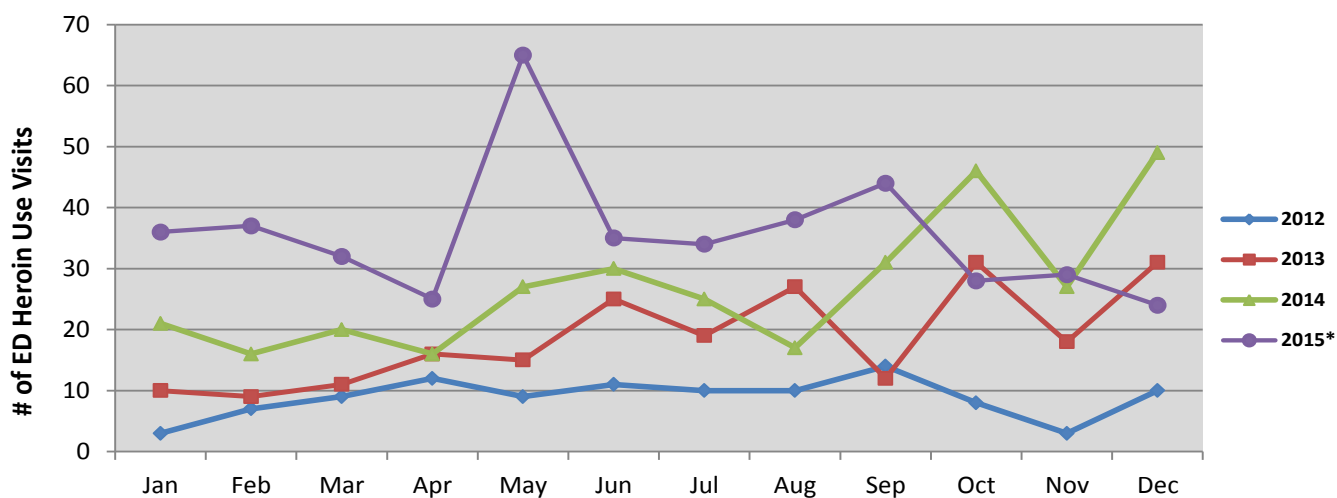
Monthly Trends: The first chart below (ED Opioid Use Visits October 2015—January 2016) is based on the new query method described above. There was a 29% increase in Opioid ED visits from December to January.

**Emergency Department Opioid Use Visits
October 2015 - January 2016**

*Source: NH Div. of Public Health Services*

ED Heroin Use Visits, 2012-2015: The chart below is based on the OLD query method to provide a comparison.

Emergency Department Heroin Use Visits by Month - 2012-2015

*Source: NH Division of Public Health Services*

*The source of these data are New Hampshire's Automated Hospital Emergency Department Data system, which includes all emergency department encounters from 26 acute care hospitals in New Hampshire. These data represent any encounter with the term "heroin or opioid" listed as chief complaint text and may represent various types of incidents including accidental poisonings, suicide, or other related types of events. These data also represent any encounter with an ICD-10 code that was designated for heroin and opioids. Currently all but two of the hospitals are sending ICD-10 data. Chief complaint and ICD-10 codes were combined to capture the maximum representation of heroin data in NH hospitals and deduplicated so encounters could only be counted once for a visit.

Opioid Related Emergency Department Visits (Continued)

Geographic and Demographic Trends: The following information identifies observable trends in opioid related Emergency Department visits on the basis of county of residence, age, and gender of patients.

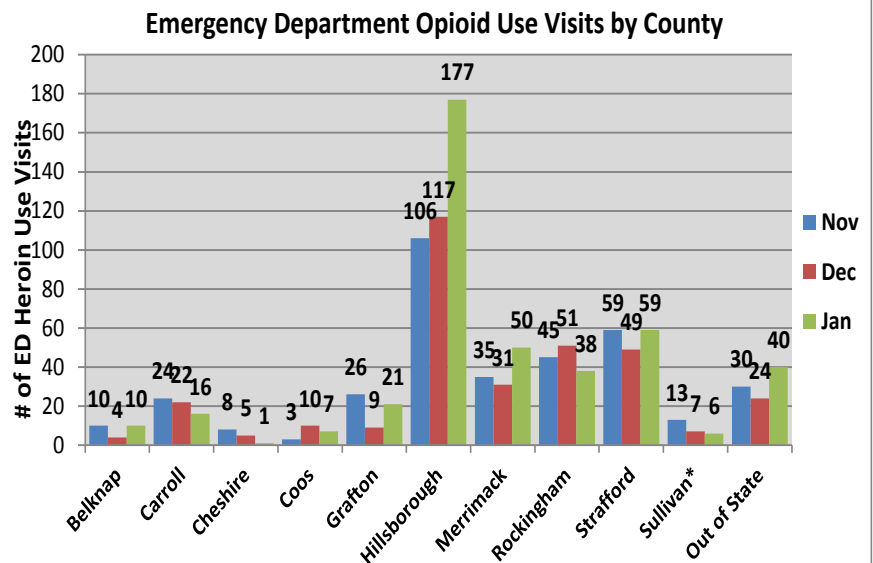
Top Counties for January:

1. Hillsborough 2. Strafford

Largest % Increase from Dec to Jan:

1. Belknap 2. Grafton

County	Nov	Dec	Jan	% Change
Belknap	10	4	10	150%
Carroll	24	22	16	-27%
Cheshire	8	5	1	-80%
Coos	3	10	7	-30%
Grafton	26	9	21	133%
Hillsborough	106	117	177	51%
Merrimack	35	31	50	61%
Rockingham	45	51	38	-25%
Strafford	59	49	59	20%
Sullivan*	13	7	6	-14%
Out of State	30	24	40	67%
TOTAL	359	329	425	29%



Source: NH Div. of Public Health Services

NOTE: County represents where the heroin use patient resides

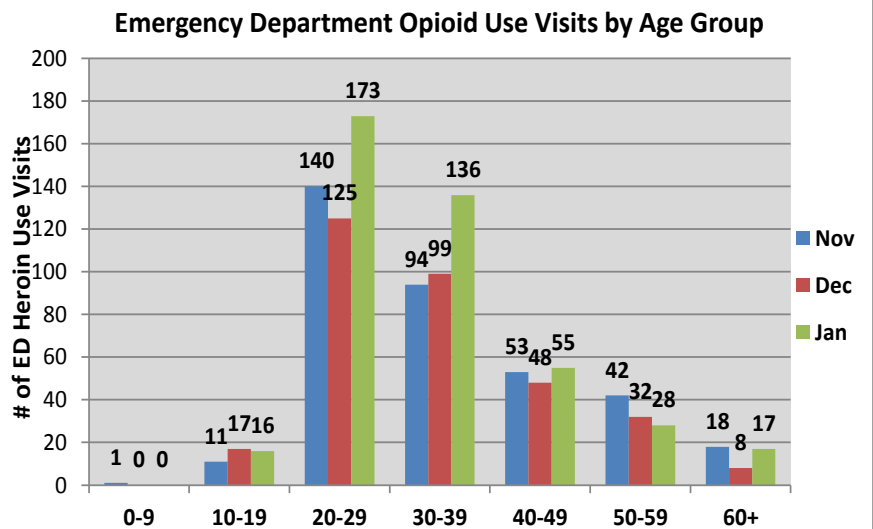
Top Age Group for January:

20-29 YOA

Largest % Increase from Nov to Dec:

60+ YOA

Age	Nov	Dec	Jan	% Change
0-9	1	0	0	0%
10-19	11	17	16	-6%
20-29	140	125	173	38%
30-39	94	99	136	37%
40-49	53	48	55	15%
50-59	42	32	28	-13%
60+	18	8	17	113%
Totals	359	329	425	29%

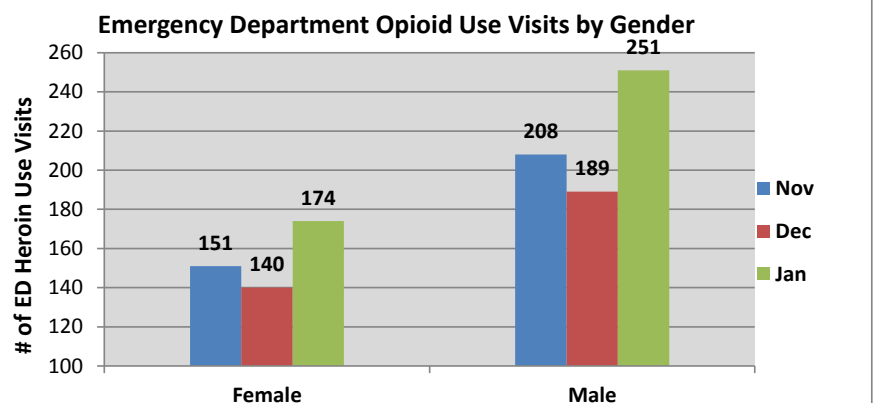


Source: NH Division of Public Health Services

**Largest % Increase from
December to January by Gender:**

Male

Gender	Nov	Dec	Jan	% Change
Female	151	140	174	24%
Male	208	189	251	33%
Totals	359	329	425	29%

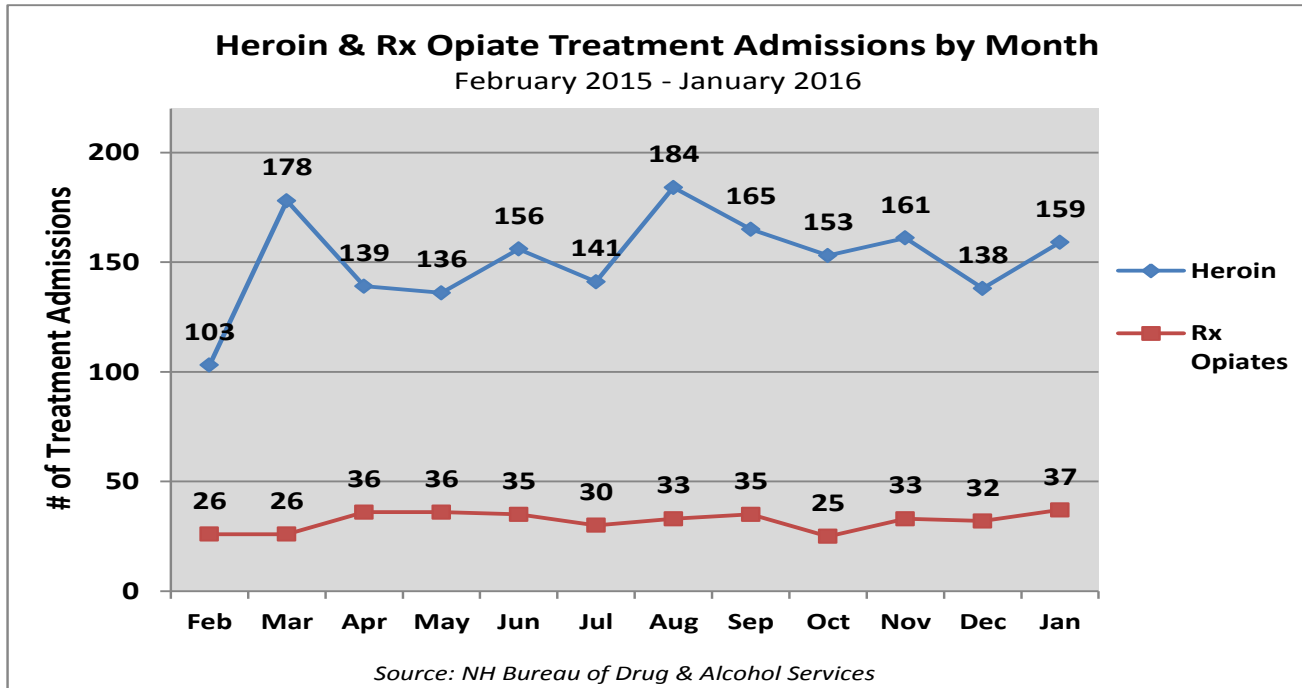


Source: NH Division of Public Health Services

Heroin & Rx Opiate Treatment Admissions

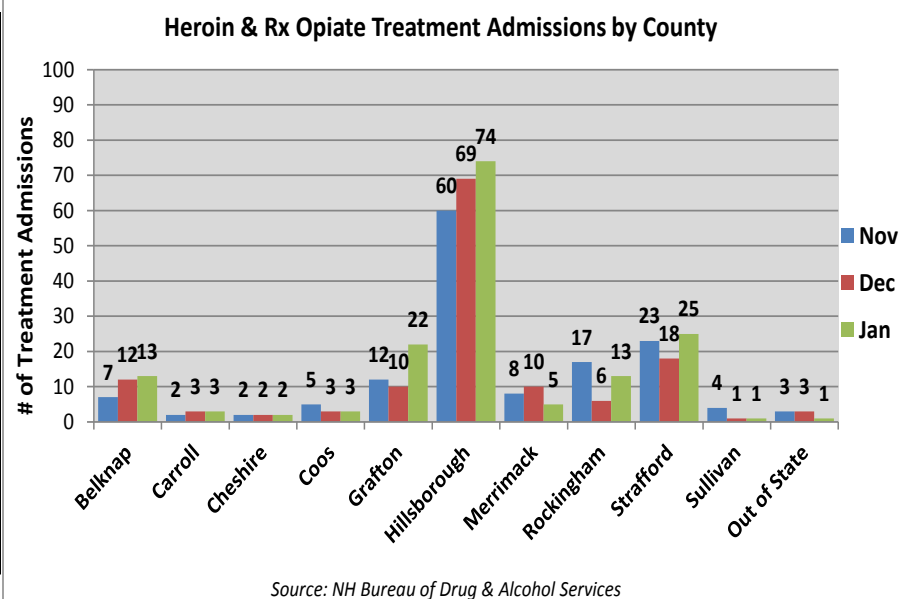
Data Source: NH Bureau of Drug & Alcohol Services

Monthly Trends: As displayed in the charts below, the number of treatment admissions for heroin decreased from November to December and then increased from December to January. The number of admissions for prescription opiates increased by 16% from December to January. When combining the number of heroin and prescription opiate treatment admissions, the overall number of admissions increased by 15% from December to January.



Geographic Trends: The county with the largest number of residents admitted to a treatment program for heroin or prescription opiates during the month of January was Hillsborough County. Grafton county experienced the largest percent increase with an increase of 120% in the number of residents admitted to treatment programs from December to January.

County	Nov	Dec	Jan	% Change
Belknap	7	12	13	8%
Carroll	2	3	3	0%
Cheshire	2	2	2	0%
Coos	5	3	3	0%
Grafton	12	10	22	120%
Hillsborough	60	69	74	7%
Merrimack	8	10	5	-50%
Rockingham	17	6	13	117%
Strafford	23	18	25	39%
Sullivan	4	1	1	0%
Out of State	3	3	1	-67%
Not provided	51	33	34	3%
Totals	194	170	196	15%



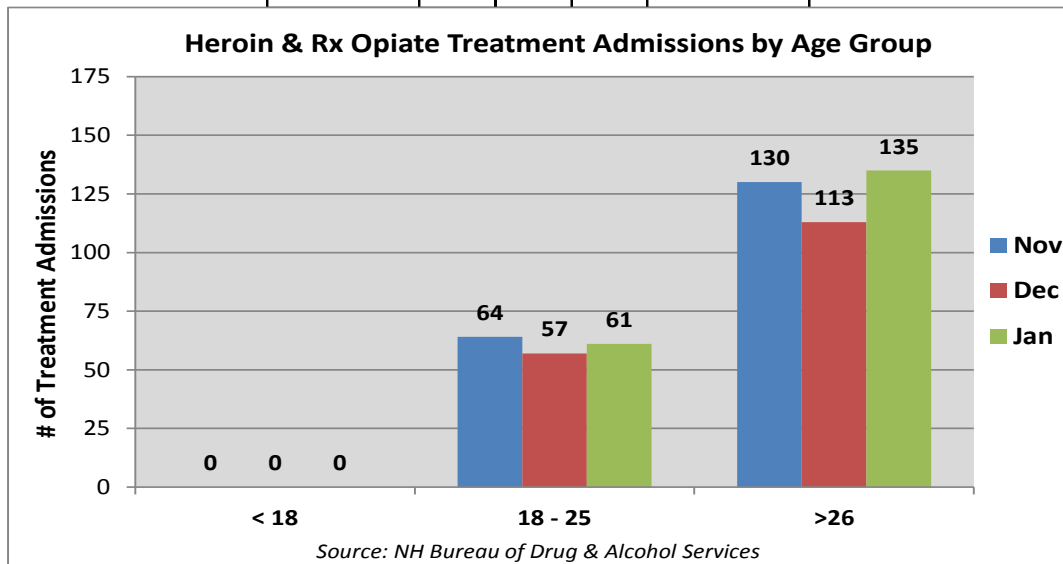
NOTE: County represents where the patient resides

Heroin & Rx Opiate Treatment Admissions (Continued)

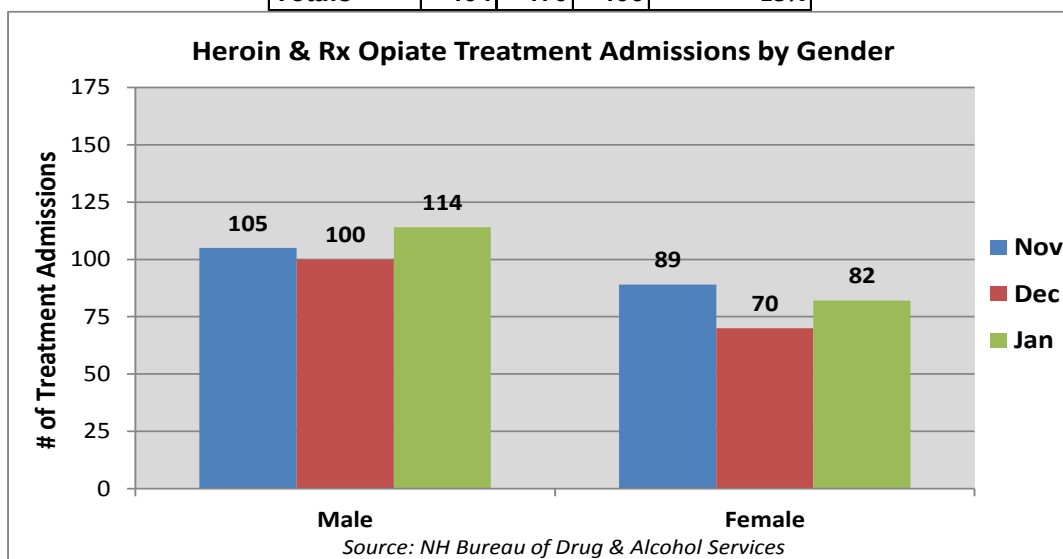
Demographic Trends: Treatment admissions for heroin and prescription opiates usage was broken down by age and gender as displayed in the charts below. Individuals 26 years of age or older exhibited the highest number of treatment admissions during the months of November, December and January.

- There were more males than females admitted to treatment programs during the months of November, December and January. The number of males admitted to treatment programs increased by 14% from December to January and the number of females admitted to treatment programs increased by 17% during the same time period.

Age Group	Nov	Dec	Jan	% Change
< 18	0	0	0	0%
18 - 25	64	57	61	7%
>26	130	113	135	19%
Totals	194	170	196	15%



Gender	Nov	Dec	Jan	% Change
Male	105	100	114	14%
Female	89	70	82	17%
Totals	194	170	196	15%



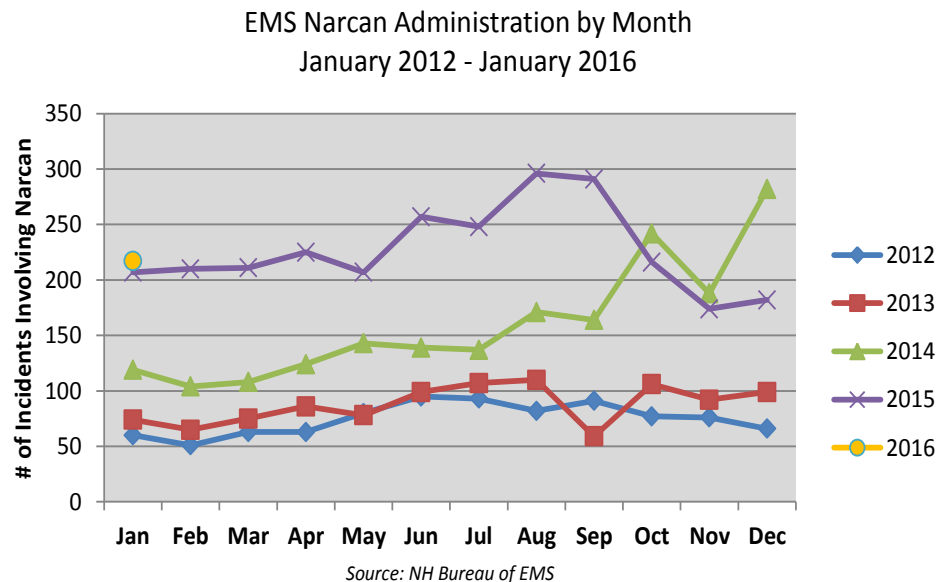
EMS Narcan Administration*

Data Source: NH Bureau of Emergency Medical Services (EMS)

Annual & Monthly Trends:

Incidents involving EMS Narcan administration increased by 19% from December 2015 to January. From January 2015 to January 2016 there has been a 5% increase in EMS Narcan administration.

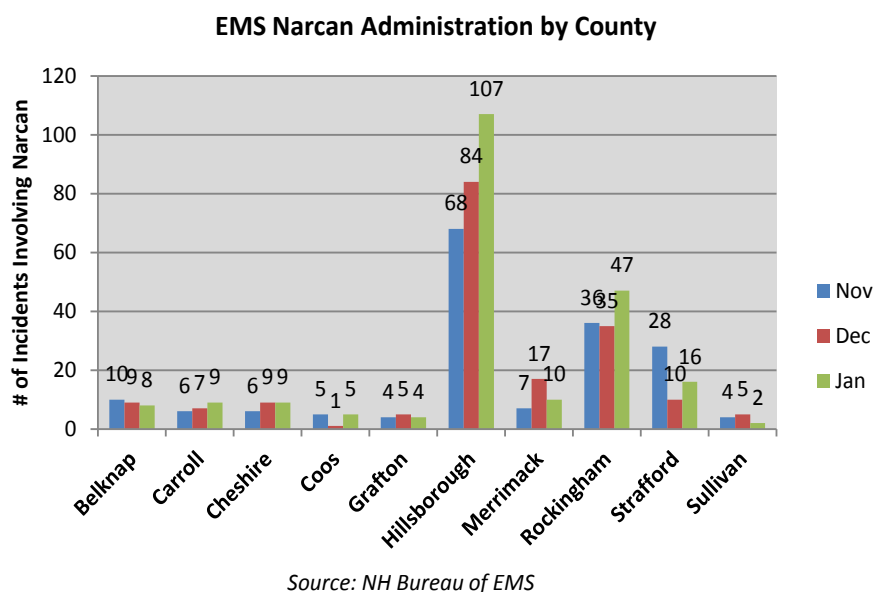
(Note: Narcan is administered in cases of cardiac arrest when the cause of the arrest cannot be determined. It therefore cannot be concluded that all of the reported Narcan cases involved drugs.)



Geographic Trends: The following chart displays the number of incidents involving Narcan administration by county for the months of November, December, and January. The county with the largest number of Narcan administrations for all three months is Hillsborough County with 68, 84, and 107 incidents, respectively. The largest percent increase in the number of incidents involving Narcan between December and January was observed in Coos County at 400%.

See the following page for a map of EMS Narcan Administration Incidents by Town for the last 12 months, February 2015 through January 2016.

County	Nov	Dec	Jan	% Change
Belknap	10	9	8	-11%
Carroll	6	7	9	29%
Cheshire	6	9	9	0%
Coos	5	1	5	400%
Grafton	4	5	4	-20%
Hillsborough	68	84	107	27%
Merrimack	7	17	10	-41%
Rockingham	36	35	47	34%
Strafford	28	10	16	60%
Sullivan	4	5	2	-60%
Total	174	182	217	19%



*Narcan data in this report involves the number of incidents where Narcan was administered, NOT the number of doses of Narcan during a certain time period. Multiple doses may be administered during an incident.

EMS/Narcen Administration By Town

2/1/2015 - 1/31/2016

Data source: New Hampshire Bureau of EMS



Prepared by:
NH Information & Analysis Center

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Belknap

1 - Center Harbor

Carroll

2 - Hales Location

3 - Harris Location

Cooks

4 - Hadleys Purchase

5 - Beans Grant

6 - Cutts Grant

7 - Sargents Purchase

8 - Pinkhams Grant

9 - Crawfords Purchase

10 - Chandlers Purchase

11 - Low & Burbanks Grant

12 - Thompson & Meserves Purchase

13 - Greens Grant

14 - Martins Location

15 - Ervings Grant

16 - Wentworth Location

17 - Atkinson & Gilmanton Academy Grant

Hillsborough

18 - Bennington

Rockingham

19 - South Hampton

20 - Seabrook

21 - East Kingston

22 - Kensington

23 - Hampton Falls

24 - Hampton

25 - North Hampton

26 - Rye

27 - Portsmouth

28 - New Castle

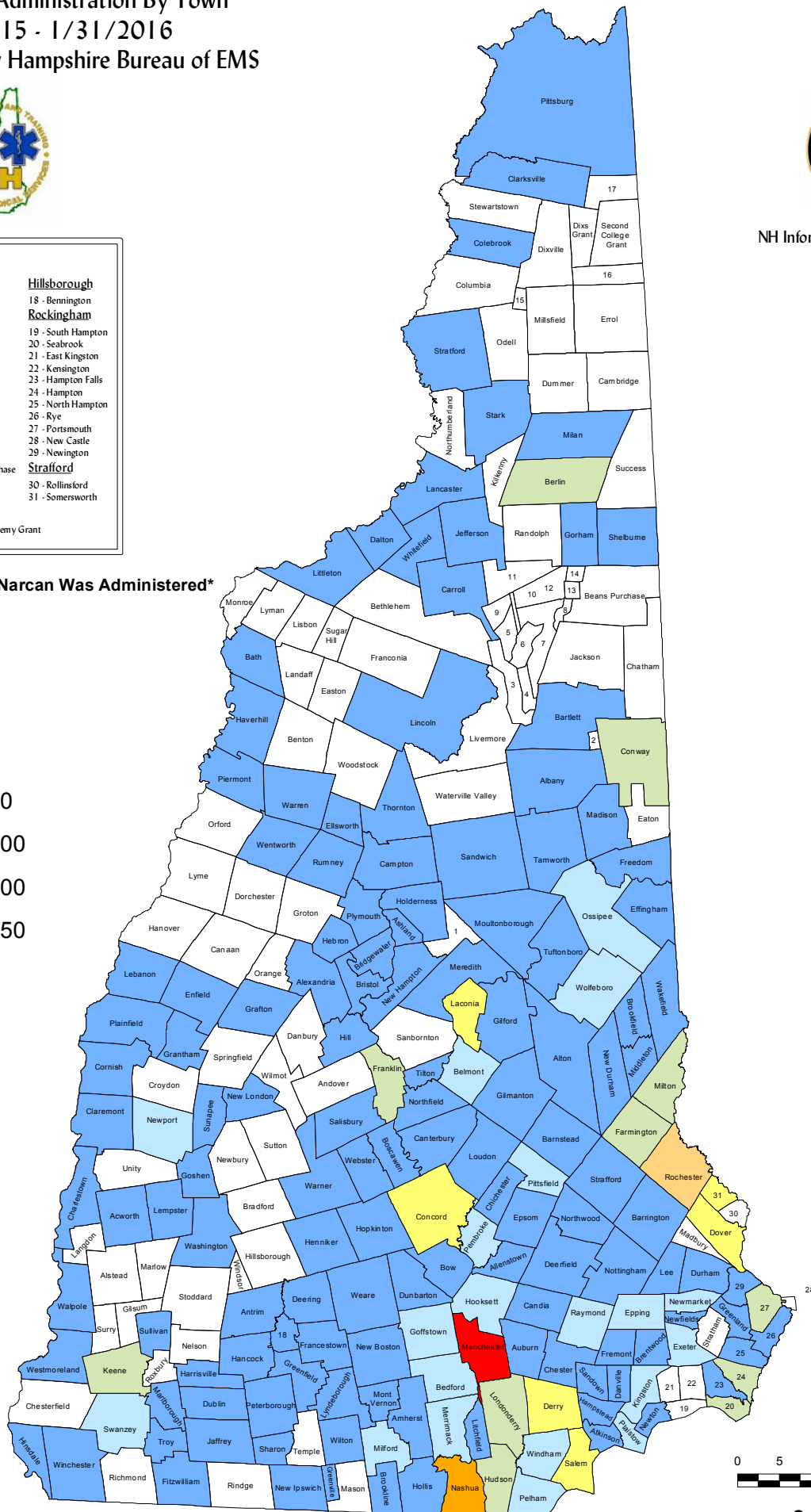
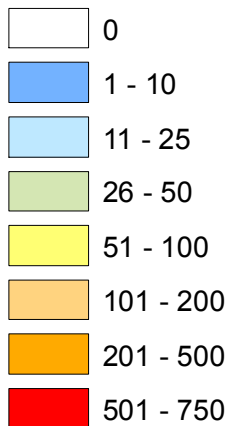
29 - Newington

Strafford

30 - Rollinsford

31 - Somersworth

Incidents Where Narcan Was Administered



0 5 10 20 30

Miles

Scale: 1:1,150,000

Drug Overdose Deaths

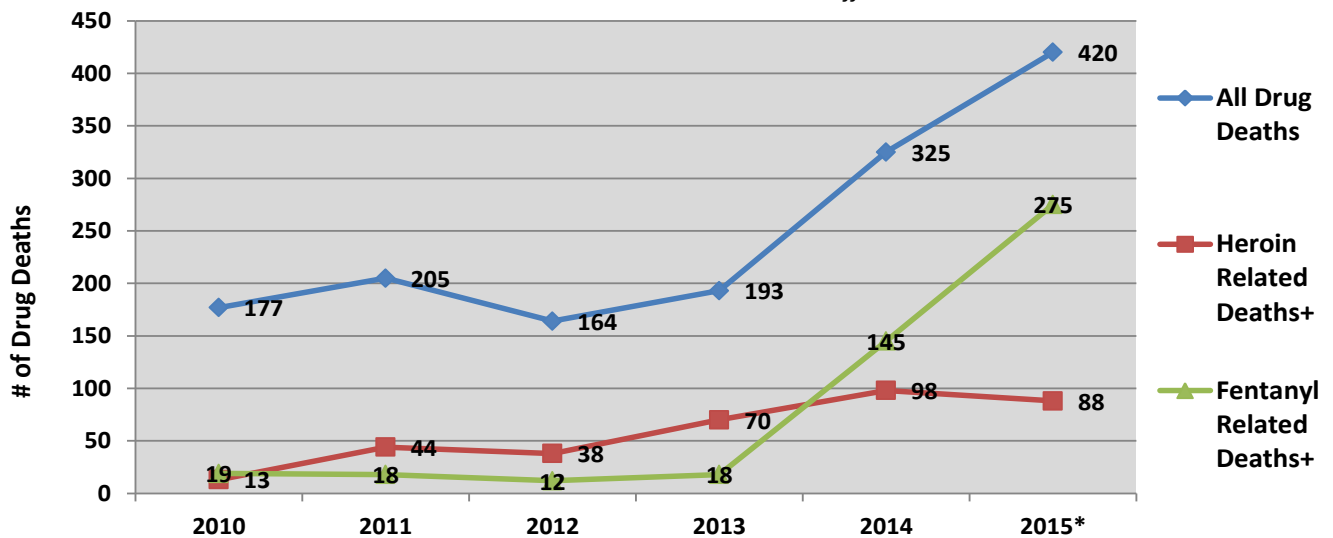
Data Source: NH Medical Examiner's Office

Annual Trends: The chart below displays overdose deaths annually from 2010 through 2015. 2015 totals are based on analysis completed as of 22 February 2016. **Fourteen cases are still pending analysis and therefore these numbers are subject to change.** The total number of drug related deaths is represented as well as deaths related to Heroin and/or Fentanyl.+ There are 60 cases from 2016 that are "pending toxicology", and there are three confirmed drug deaths in 2016. **Please see page 9 for a map of 2015 overdose deaths by town where the individual is believed to have used the drug(s).**

+Heroin and Fentanyl Related deaths are not mutually exclusive, several deaths involved both drugs.

Overdose Deaths By Year

Data Source: NH Medical Examiner's Office

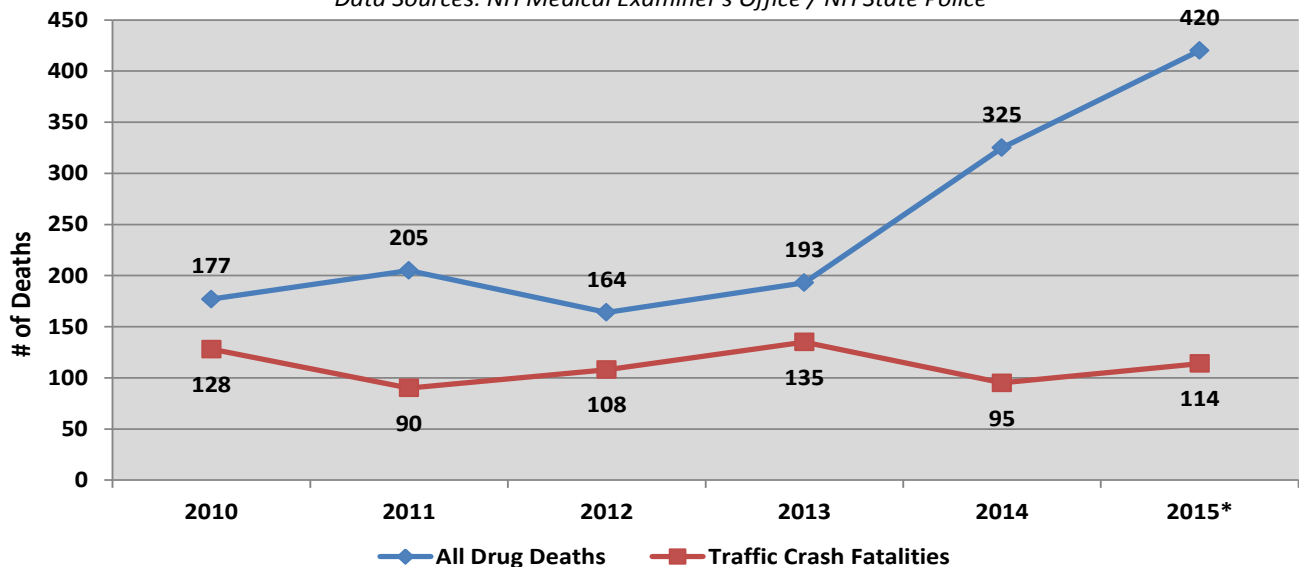


*2015 Numbers are based on analysis completed as of 22 February 2016 - cases still pending

+ Heroin & Fentanyl Related deaths are not mutually exclusive, several deaths involved both drugs

Drug Deaths vs. Traffic Deaths by Year

Data Sources: NH Medical Examiner's Office / NH State Police



*2015 Drug Death numbers are based on analysis completed as of 22 Feb 2016 - many cases are still pending analysis.

Overdose Deaths by Town* - 2015+ (Data Source: NH Medical Examiner's Office)

*Location where the drug(s) is suspected to have been used.

+2015 data was reported on February 8, 2016.
There are many more deaths that are suspected to be drug related, but the official cause of death is pending until the toxicology results are received.



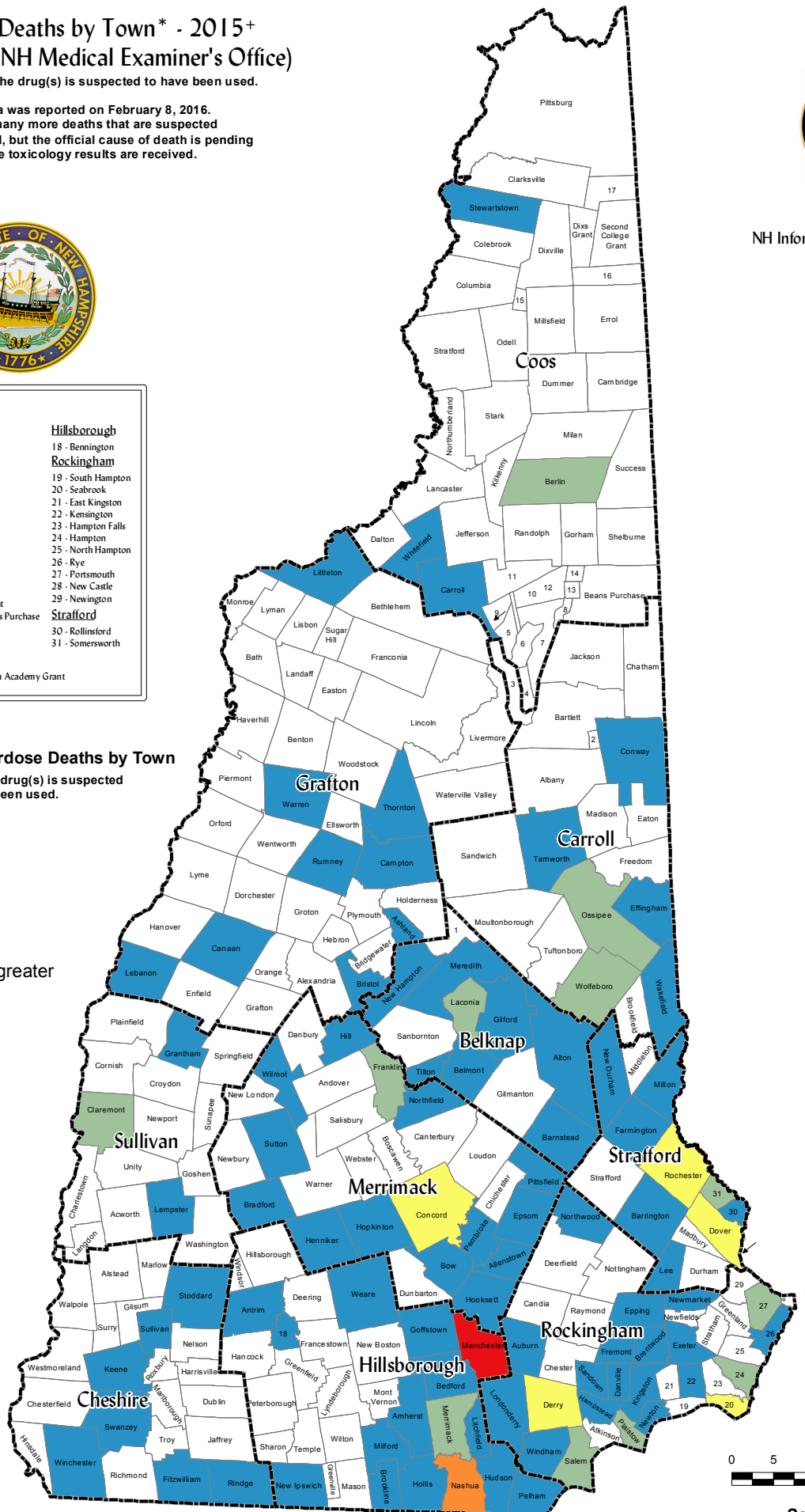
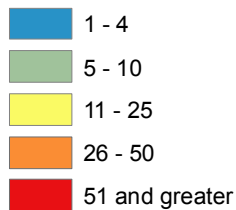
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Belknap	Hillsborough
1 - Center Harbor	18 - Bennington
Carroll	Rockingham
2 - Hales Location	19 - South Hampton
3 - Harts Location	20 - Seabrook
Coos	21 - East Kingston
4 - Hadleys Purchase	22 - Kensington
5 - Beans Grant	23 - Hampton Falls
6 - Cutts Grant	24 - Hampton
7 - Sargents Purchase	25 - North Hampton
8 - Pinkhams Grant	26 - Rye
9 - Crawfords Purchase	27 - Portsmouth
10 - Chandlers Purchase	28 - New Castle
11 - Low & Burbanks Grant	29 - Newington
12 - Thompson & Meservies Purchase	Strafford
13 - Greens Grant	30 - Rollinsford
14 - Martins Location	31 - Somersworth
15 - Ervings Grant	
16 - Wentworth Location	
17 - Atkinson & Gilmanton Academy Grant	

Number of Overdose Deaths by Town

*Location where the drug(s) is suspected to have been used.



0 5 10 20 30
Miles
Scale: 1:1,150,000

Situational Awareness:**Nashua Schools to Stock Narcan**

According to nashuatelegraph.com, the Nashua Board of Education approved stocking the opioid antagonist Narcan in district schools. Board member George Farrington said the move is a precaution, but a crucial one. “I hope this isn’t construed anywhere in the public as an indication we have a drug problem in our schools,” However, there is a problem in the community and in the state. The Department of Health and Human Services is providing the Narcan to the district at no charge. New legislation introduced limited liability for those who administer Narcan in good faith. The board could create similar policy for the administration of epinephrine. Farrington said, “I don’t want our staff standing around wondering how much longer it’s going to take for the EMTs to get to our schools.”

In the News...**Misuse of ADHD Drugs by Young Adults Drives Rise in ER Visits**

According to nhpr.org, emergency room visits linked to misuse of the drug are on the rise. According to a study published Tuesday in the *Journal of Clinical Psychiatry* found that nonmedical use of Adderall and generic versions of the drug increased by 67% among adults between 2016—2011. “Young adults in the 10-25-year range are most likely to misuse these drugs,” says Dr. Ramin Mojtabai, a professor at the John Hopkins Bloomberg School of Public Health. The number of emergency room visits involving Adderall misuse increased from 862 visits in 2006 to 1,489 in 2011 according to data from the Drug Abuse Warning Network. ER visits linked to Ritalin, another well-known stimulant used to treat ADHD, increased only slightly among young adults from 293 ER visits in 2006 to 310 in 2011. “The extended-release formulation of [Adderall] has a longer duration of action than [Ritalin], producing a more steady effect,” says Dr. Ramin Mojtabai. A prior study found that college students have several justifications for their use of ADHD medication, including the belief it could improve their smarts.

Governors from all 50 States Supporting Prescription Drug Monitoring Program

According to WMUR9, Chief executives from all 50 states are endorsing a plan to boost prescription drug monitoring programs to present over-prescription. At the Serenity Place drug treatment center in Manchester, staff estimate that 70 percent of patients who walk in the door seeking treatment started their path to addiction with prescription from a doctor. They say it makes sense to focus more attention on that part of the problem. “It’s getting worse here in New Hampshire, more specifically right here in Manchester,” Stephanie Bergeron said. “We know that this is probably one of the main sources of the epidemic we’re seeing right now is the over-prescription of opioids and to take a stop like this could really make a difference.” In a phone interview with Gov. Maggie Hassan, she said national standards would naturally limit the supply of painkillers being handed out to the public. “Particularly, how many doses of an opioid can be prescribed for a particular type of procedure.” President Obama has expressed skepticism about limits for painkiller prescriptions, saying that won’t solve the problem, and that “in some cases, addiction is already there.”

Substance Abuse Treatment/Recovery Directory:*State funded treatment facilities in NH (NOT a complete list)—Source NH Department of Health & Human Services***CONCORD****Concord Hospital****The Fresh Start Program**

(Intensive Outpatient 18 years and older and Outpatient Services.)

250 Pleasant Street, Suite 5400

Concord, NH 03301

Phone: 603-225-2711 ext. 2521

Fax: 603-227-7169

DOVER**Southeastern NH Alcohol and Drug Abuse Services (Dover)**

(Outpatient and Intensive Outpatient Services.)

272 County Farm Road

Dover, NH 03820

Crisis Center: 603-516-8181

Main: 603-516-8160

Fax: 603-749-3983

GILFORD**Horizons Counseling Center**

(Intensive Outpatient 18 years and older and Outpatient Services.)

25 Country Club Road Suite #705

Gilford, NH 03249

Phone: 603-524-8005

Fax: 603-524-7275

LEBANON**Headrest**

12 Church Street

PO Box 247

Lebanon, NH 03766

Hotline: 603-448-4400 or 800-639-6095

Phone: 603-448-4872

Fax: 603-448-1829

MANCHESTER**Child and Family Services****Adolescent Substance Abuse Treatment Program (ASAT)**

(Intensive Outpatient Services for Adolescents.)

404 Chestnut Street

Manchester, NH 03105

Phone: 800-640-6486

or 603-518-4001

Fax: 603-668-6260

Families in Transition

(Provides services for parenting women including pregnant women, intensive outpatient services; housing and comprehensive social services.)

122 Market Street

Manchester, NH 03104

Phone: 603-641-9441

Fax: 603-641-1244

The Mental Health Center of Greater Manchester

(Outpatient Adolescent and Families.)

1228 Elm Street, 2nd Floor

Manchester, NH 03101

Phone: 603-668-4111

Fax: 603-628-7733

Manchester Alcoholism and Rehabilitation Center Easter Seals Farnum Outpatient Services

(Intensive Outpatient 18 years and older and Outpatient Services.)

140 Queen City Avenue

Manchester, NH 03101

Phone: 603-263-6287

Fax: 603-621-4295

NASHUA**Greater Nashua Council on Alcoholism****Keystone Hall**

(Outpatient and Intensive Outpatient Services for Adults, Adolescents and Their Families.)

12 & 1/2 Amherst Street

Nashua, NH 03063

Phone: 603-943-7971 Ext. 3

Fax: 603-943-7969

The Youth Council

(Outpatient for Adolescents and Families.)

112 W. Pearl Street

Nashua, NH 03060

Phone: 603-889-1090

Fax: 603-598-1703

PORTSMOUTH**Families First of the Greater Seacoast**

(Pregnant and Parenting Women, Primary Care Setting, Outpatient.)

100 Campus Drive, Suite 12

Portsmouth, NH 03801

Phone: 603-422-8208 Ext. 150

Fax: 603-422-8218

A full list of Substance Abuse and Treatment Facilities can be found [here](#).