

445

NORTH CAROLINA EMERGENCY DEPARTMENT (ED) VISITS FOR OPIOID OVERDOSE: JANUARY 2019

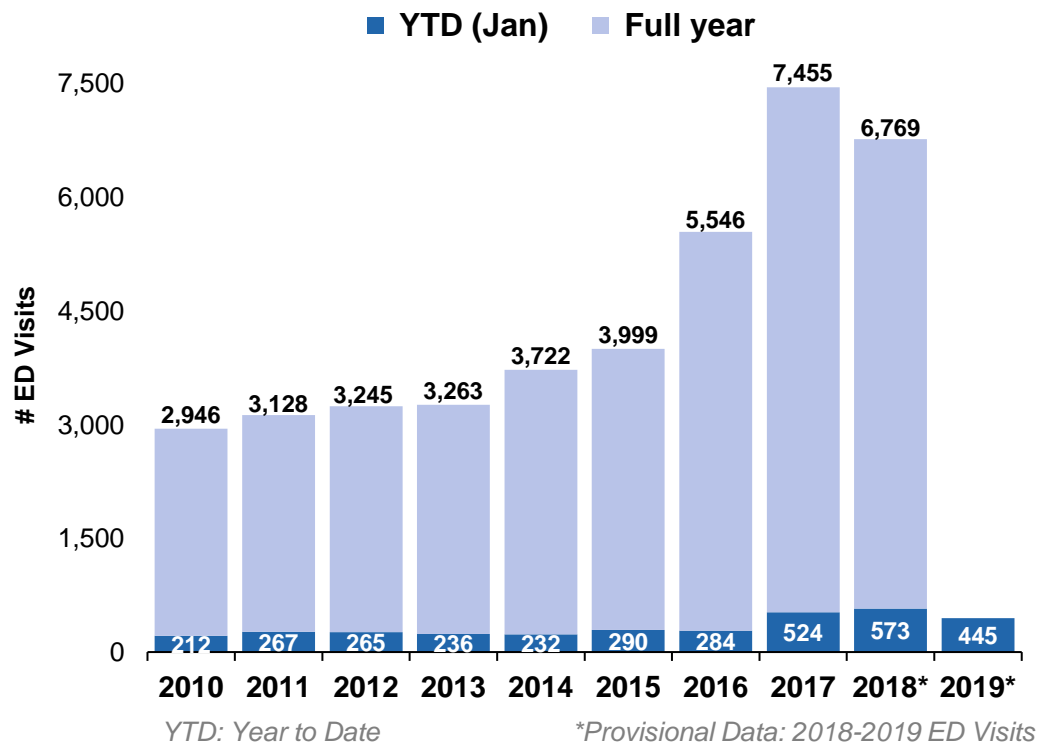
445 Opioid overdose ED visits January 2019

Compared to 573 January 2018

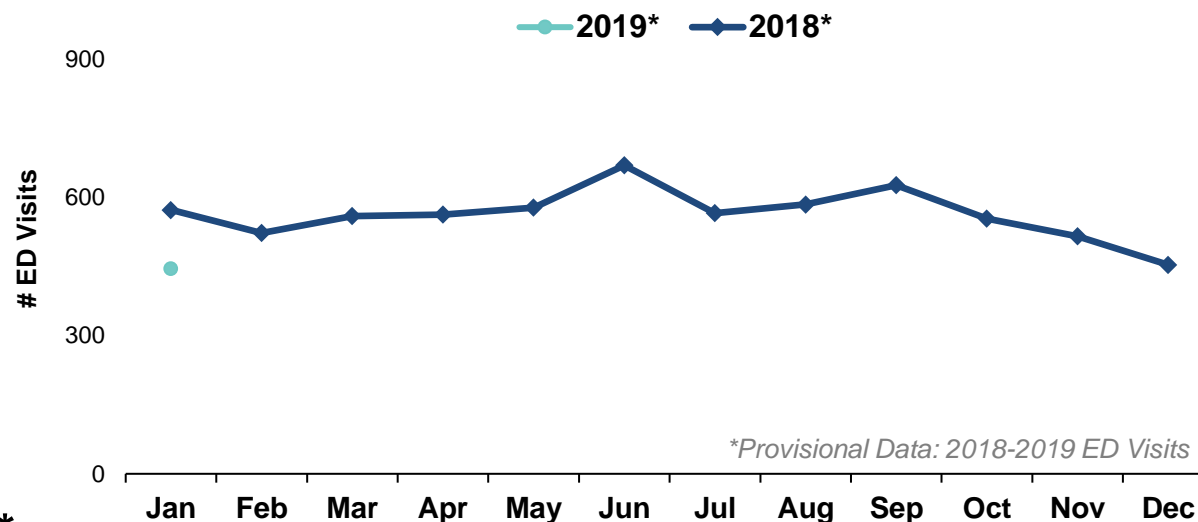
Data Source: NCDETECT: ED; Custom Event: Overdose: Opioid Overdose V.2 (ICD-9/10-CM)

Note: Counts based on ICD-10-CM diagnosis code of an opioid overdose: **T40.0** (Opium), **T40.1** (Heroin), **T40.2** (Other Opioids), **T40.3** (Methadone), **T40.4** (Other Synthetic Narcotics), and **T40.6** Other and Unspecified Narcotics).

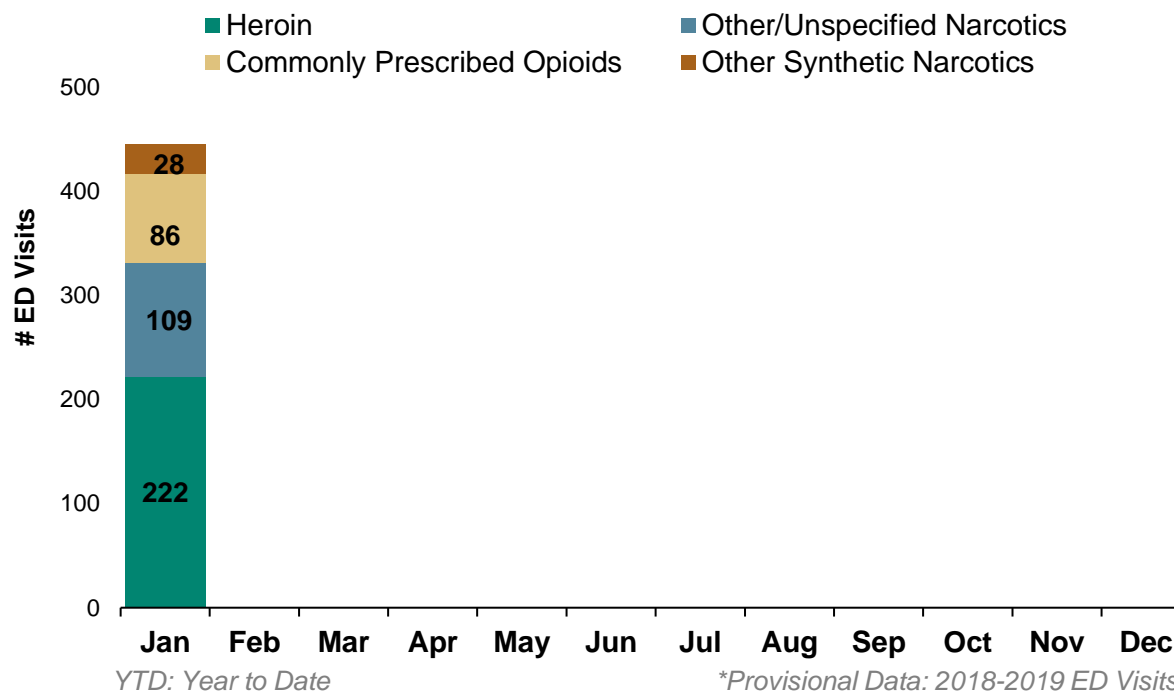
Opioid Overdose ED Visits by Year: 2010-2019*



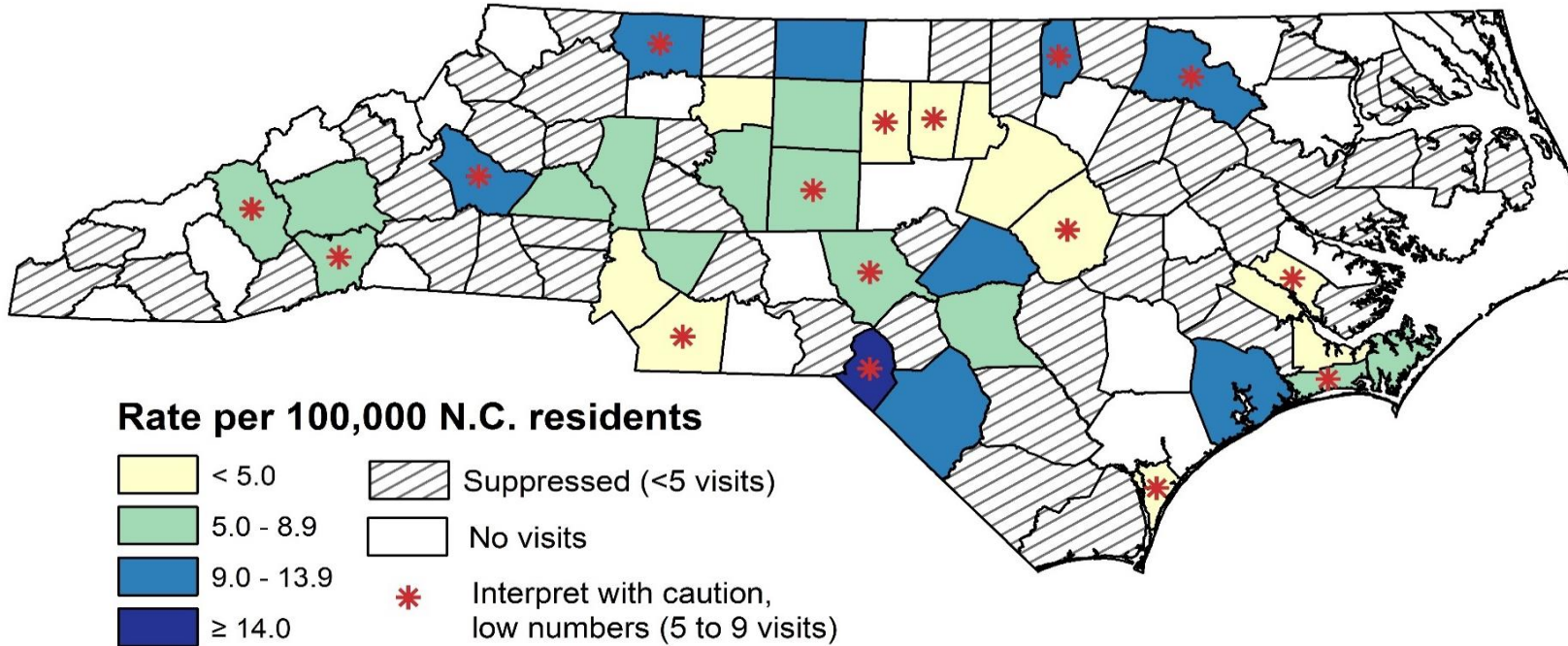
Opioid Overdose ED Visits by Month: 2018-2019*



Monthly ED Visits by Opioid Class: 2019* YTD



Rate of Opioid Overdose ED Visits by County: January 2019*



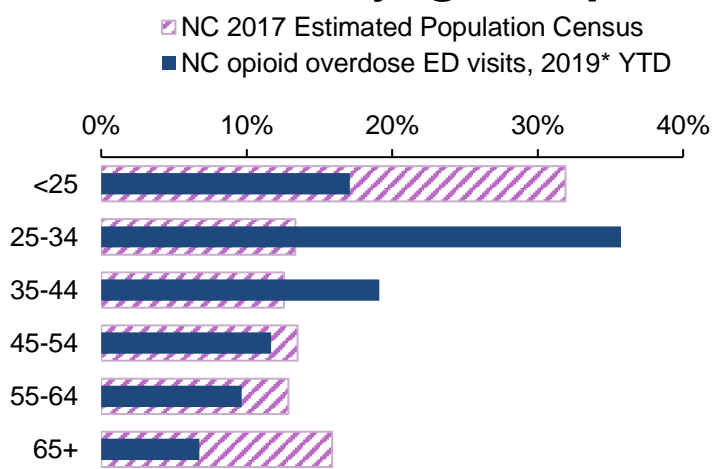
Highest Rates of Opioid Overdose ED visits among Counties ≥10 visits

County	Count	Rate
Rockingham	11	12.1
Robeson •	14	10.6
Onslow •	18	9.3
Harnett	12	9.0
Cumberland •	27	8.1
Davidson	13	7.9
Catawba	10	6.3
Cabarrus	13	6.3
Buncombe	16	6.2
Iredell	10	5.7

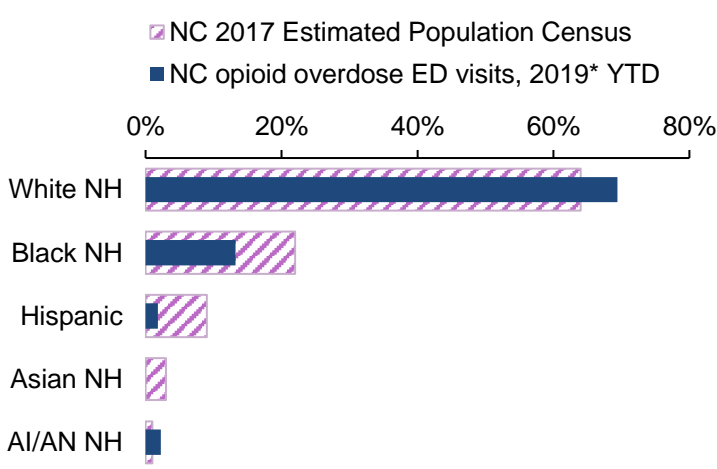
Note: Rate per 100,000 N.C. residents;
 • This county saw an increase of 6 or more overdoses this month compared to last month.

Demographics of 2019 Opioid Overdose ED Visits Compared to the 2017 NC Standard Population Census

ED Visits by Age Group



ED Visits by Race Ethnicity



Demographic data from the North Carolina census provide population-level context for potential disparities by age or race among opioid overdose ED visits.

In North Carolina, ED visits for opioid overdose occur predominately among whites, and those ages 20-44 years.

Source: U.S. Census Bureau. *Quick Facts Data: North Carolina 2016*. Retrieved August 22, 2017, from <http://quickfacts.census.gov>.



Note: NH (Non-hispanic); AI/AN (American Indian/ Alaskan Native)

NOTE: The North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) is North Carolina's statewide syndromic surveillance system. For training on NCDTECT, contact Amy Ising, ising@ad.unc.edu.

*Emergency department visit data from NC DETECT are provisional and should not be considered final. There may be data quality issues affecting our counts: counties with <10 cases may not be true lack of opioid overdose cases but data quality issues; additionally, some hospitals use non-specific poisoning codes rather than specific opioid poisoning codes.