



Health Alert



City of Chicago
Lori E. Lightfoot, Mayor

www.chicagohan.org

Chicago Department of Public Health
Allison Arwady MD MPH, Commissioner

September 1, 2020

Mid-Year Chicago Opioid Update

Key Messages and Action Steps

- From January 1, 2020 through June 30, 2020, Chicago has seen a **61% increase in opioid-related EMS responses and a 55% increase in opioid-related overdose deaths** when compared to January 1, 2019 through June 30, 2019.
 - There were 7,301 opioid-related¹ EMS responses.
 - There were at least 573 opioid-related overdose deaths in Chicago².
- September is National Recovery Month, participate in the Recovery Month [webinar series](#).
- Consider [immediate initiation of buprenorphine](#) in persons whose opioid overdose was reversed with [Naloxone](#).
- Increase availability of Naloxone and [increase signage](#) in your facility to increase awareness.
- Share these [Harm Reduction Tips](#) for people who use drugs.
- [Earn 3 CME hours](#) reviewing Safe Opioid Prescribing Practices

Background: Opioids are a class of drugs that include illicit substances like heroin or carfentanyl as well as prescription pain medications including oxycodone, morphine, and fentanyl. Opioids exert their effects by binding to specific receptors to diminish the sense of pain. Other effects of opioids include mood alteration to induce euphoria, constipation, and depression of the respiratory system. There are several ways overdoses can occur such as taking a regular dose after tolerance has lowered, taking a stronger dose than the body is accustomed to, or combining opioids with other substances such as benzodiazepines. For the first six months of 2020, 80% of opioid-related overdose deaths involved fentanyl³.

Routes of Opioid Consumption: oral; inhaled/snorted through the nose; smoked; or injected.

Recognizing Opioid Overdose: Signs and symptoms include slow, shallow breathing or no breathing; no response when the person's name is called; blue or gray lips and fingernails; pale, cold and clammy skin; slow pulse or no pulse; small and constricted pupils.

Treatment: Opioid use disorder is a chronic condition and can be effectively managed with evidence-based treatment and life-long support. The three FDA-approved drugs for treatment of opioid use disorder are methadone, buprenorphine, and naltrexone. Settings where these medications can be initiated include: the ED, inpatient settings, outpatient primary care and behavioral health clinics, telehealth/virtual care visits. [Naloxone](#) is a medication that acts as an opioid antagonist and is designed to rapidly reverse an opioid overdose. If the first dose does not improve condition in 2-3 minutes, give a second dose. It is important to increase access to this life saving medication by providing naloxone to all people who use opioids and those who know people who use opioids. Providers can initiate buprenorphine immediately after reversal of opioid overdose with naloxone using [this protocol](#). When making referrals for treatment, a [warm handoff](#) is preferred.

Laboratory: Diagnosis of opioid overdose is often made clinically, when the signs and symptoms listed above are observed. Urine drug screens can be helpful in confirming the presence of opioids in the system.

Patient Counseling: The [Brief Negotiated Interview](#) can be used with people who experienced an overdose to raise the subject of opioid use, provide feedback on their use, assess readiness to change, negotiate their goals, and initiate treatment or provide a referral to treatment. Regardless of readiness for treatment, patients should be provided naloxone and counseled to carry it with them at all times and to inform those in their social circle that they possess naloxone for overdose reversal.

Reporting: When a drug overdose treatment is provided in a hospital's Emergency Department (ED), the case shall be reported to the [Illinois Department of Public Health \(IDPH\)](#) within 48 hours after providing treatment for the drug overdose.

September is National Recovery Month and is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), which is a part of the U.S. Department of Health and Human Services (HHS). Now in its 31st year, Recovery Month celebrates the gains made by those living in recovery. The following webinars provide an opportunity to educate the public about substance use treatment and mental health services that support those in recovery to live healthy and rewarding lives.

- [September 3: Integration of Medication-Assisted Treatment in Treatment and Recovery Support](#)
- [September 10: SAMHSA Transforming Lives Through Supported Employment](#)
- [September 17: Communities Supporting Recovery](#)
- [September 24: The Importance of Integrating Recovery Support Services: The Certified Community Behavioral Health Clinic Model](#)

¹Chicago Fire Department Emergency Medical Services. Data provided reflect all EMS responses where naloxone was administered and where there was indication of opioid involvement. These cases have not been confirmed by a clinician. ²This count comes from the Cook County Medical Examiner's opioid dashboard as of 5/27/20. **Numbers are provisional and subject to change.**

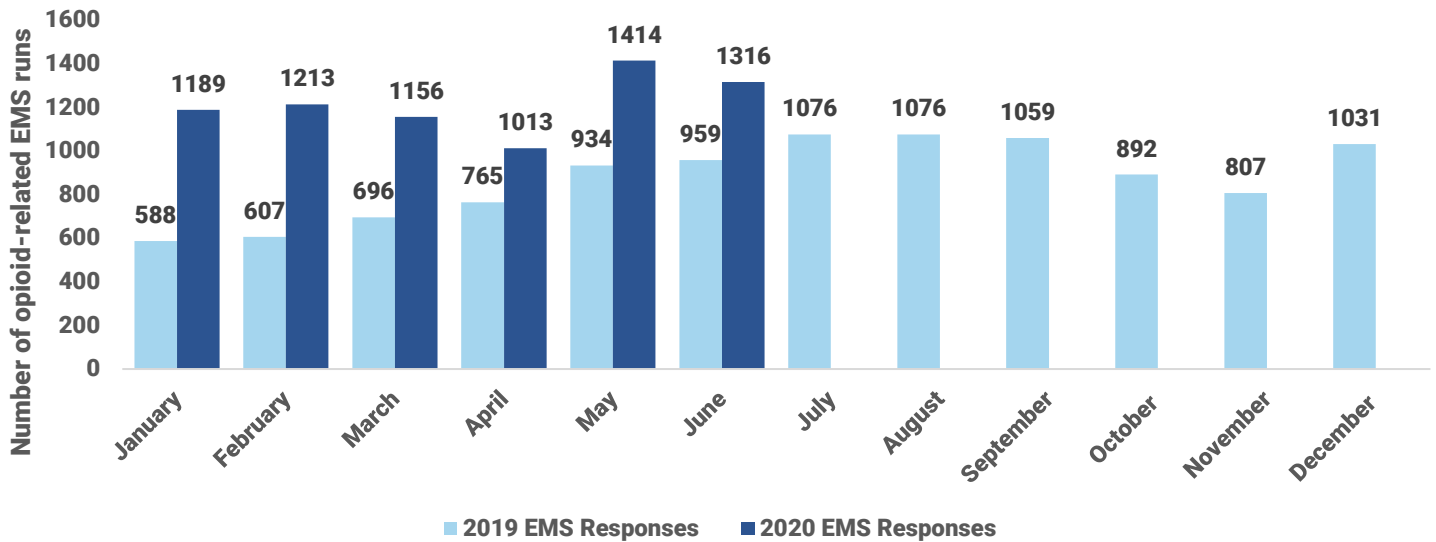


CHICAGO OPIOID UPDATE: Mid Year

Opioid-related overdose deaths are provisional, and subject to change. For informational use.

There were **7,301** opioid-related EMS responses and **573** opioid-related deaths in Chicago in January-June 2020. This is a **60%** increase in opioid-related EMS responses and a **55%** increase in deaths compared to 2019.

Chicago opioid-related EMS responses by month, 2019 and 2020



Opioid-Related Overdose, Chicago		
	Counts	2019 to 2020 % Change
January-June		
EMS Runs ¹	7,301	60.5%
Naloxone doses administered ²	8,878	57.5%
Opioid- Related Overdose Death ³	573	54.9%

Key Findings:

- 573 opioid-related overdose deaths occurred in Chicago from January-June 2020, over a 50% increase from the same time period in 2019.
- Over 80% of opioid-related overdose deaths involved-fentanyl .
- In Chicago during the first half of 2020, opioid-related overdose deaths were the highest among men; Non-Latinx Blacks; and adults age 45-54.
- All age groups experienced an increase in opioid-related death rate from the first half of 2020 as compared to 2019. The greatest increases were among 15-25 and 65-74 year-olds.
- EMS has responded to opioid-related overdoses in 76 of 77 community areas

Recent CDPH actions to combat the opioid epidemic:

- CDPH has expanded overdose prevention and harm reduction services in communities of highest need. These services include naloxone distribution, syringe services, and linkage to medication assisted treatment.
- CDPH has piloted a mobile treatment team that deflects persons arrested in possession of cocaine/heroin into treatment services. This pilot expands these deflection services across all Chicago police districts.
- CDPH has funded Illinois Public Health institute (IPHI) to convene a Learning Collaborative for hospital and community-based providers to expand evidence-based approaches to overdose prevention and treatment of opioid use disorder.
- CDPH funded a novel drug checking program that allows persons who use drugs to have their drugs checked prior to usage to reduce risk of overdose by identifying adulterants that increase overdose risk.
- With guidance from the West Side Heroin/Opioid Task Force, CDPH helped to facilitate the formation of the new South Side Opioid Task Force.
- For more information about opioids in Chicago visit:

<https://overcomeopioids.org/>

¹Chicago Fire Department Emergency Medical Services. Data provided reflect all EMS responses where naloxone was administered and where there was indication of opioid involvement. These cases have not been confirmed by a clinician.

²This count only reflects naloxone administered by the Chicago Fire Department Emergency Medical Services.

³This count comes from the Cook County Medical Examiner's office as of 7/22/20. **Numbers are provisional and subject to change.**

Opioid-related overdose death characteristics, Chicago January - June 2020

	January - June 2019			January - June 2020			2019-2020
	n	%	Rate ⁱⁱ	n	%	Rate ⁱⁱ	% Change in rate
Chicago	370	100.0%	13.6	573	100.0%	20.9	53.7%
Drug Typeⁱ							
Heroin-involved	211	57.0%	7.8	264	46.1%	9.7	24.4%
Fentanyl-involved	297	80.3%	11.0	471	82.2%	17.2	56.4%
Fentanyl – only opioid involved	118	31.9%	4.3	213	37.2%	7.7	79.1%
Opioid pain reliever-involved ⁱⁱⁱ	26	7.0%	0.9	36	6.3%	1.2	33.3%
Methadone-involved	25	6.8%	0.9	62	10.8%	2.3	155.6%
Gender							
Male	284	76.8%	21.7	438	76.4%	33.3	53.5%
Female	86	23.2%	6.2	135	23.6%	9.5	53.2%
Race-Ethnicity^{iv}							
Black, non-Latinx	204	55.1%	21.5	340	59.3%	35.6	65.6%
White, non-Latinx	114	30.8%	11.8	151	26.4%	15.8	33.9%
Latinx	50	13.5%	6.9	73	12.7%	10.6	5.0%
Asian or Pacific Islander, non-Latinx	1	0.3%	0.4	5	0.9%	2.9 [^]	625.0%
Age (years)^v							
0-14	0	0.0%	0	1	0.2%	0.1 [^]	-
15-24	5	1.4%	1.2	29	5.1%	7.1	491.7%
25-34	57	15.4%	11.1	86	15.0%	16.7	50.5%
35-44	68	18.4%	18	96	16.8%	25.4	41.1%
45-54	127	34.3%	37.5	157	27.4%	46.3	23.5%
55-64	91	24.6%	34.6	149	26.0%	56.7	63.9%
65-74	22	5.9%	14.6	50	8.7%	33.1	126.7%
75+	0	0.0%	0	3	0.5%	3.3	-

Polysubstance use among opioid-related overdose deaths, Chicago January-June 2020

	January - June 2019			January - June 2020			2019-2020
	n	%	Rate ⁱⁱ	n	%	Rate ⁱⁱ	% Change in rate
Chicago	370	100.0%	13.6	573	100.0%	20.9	53.7%
Drug Typeⁱ							
Opioid-only	208	56.2%	7.7	347	60.6%	12.8	66.2%
Cocaine-involved	127	34.3%	4.7	193	33.7%	6.9	46.8%
Methamphetamine-involved	10	11.6%	0.3	15	2.6%	0.6	100.0%
Benzodiazepine-involved	49	13.2%	1.7	32	5.6%	1.2	-29.4%

Data Source: Cook County Medical Examiner's office as of 6/7/20. **Numbers are provisional and subject to change** US Census Bureau. 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.

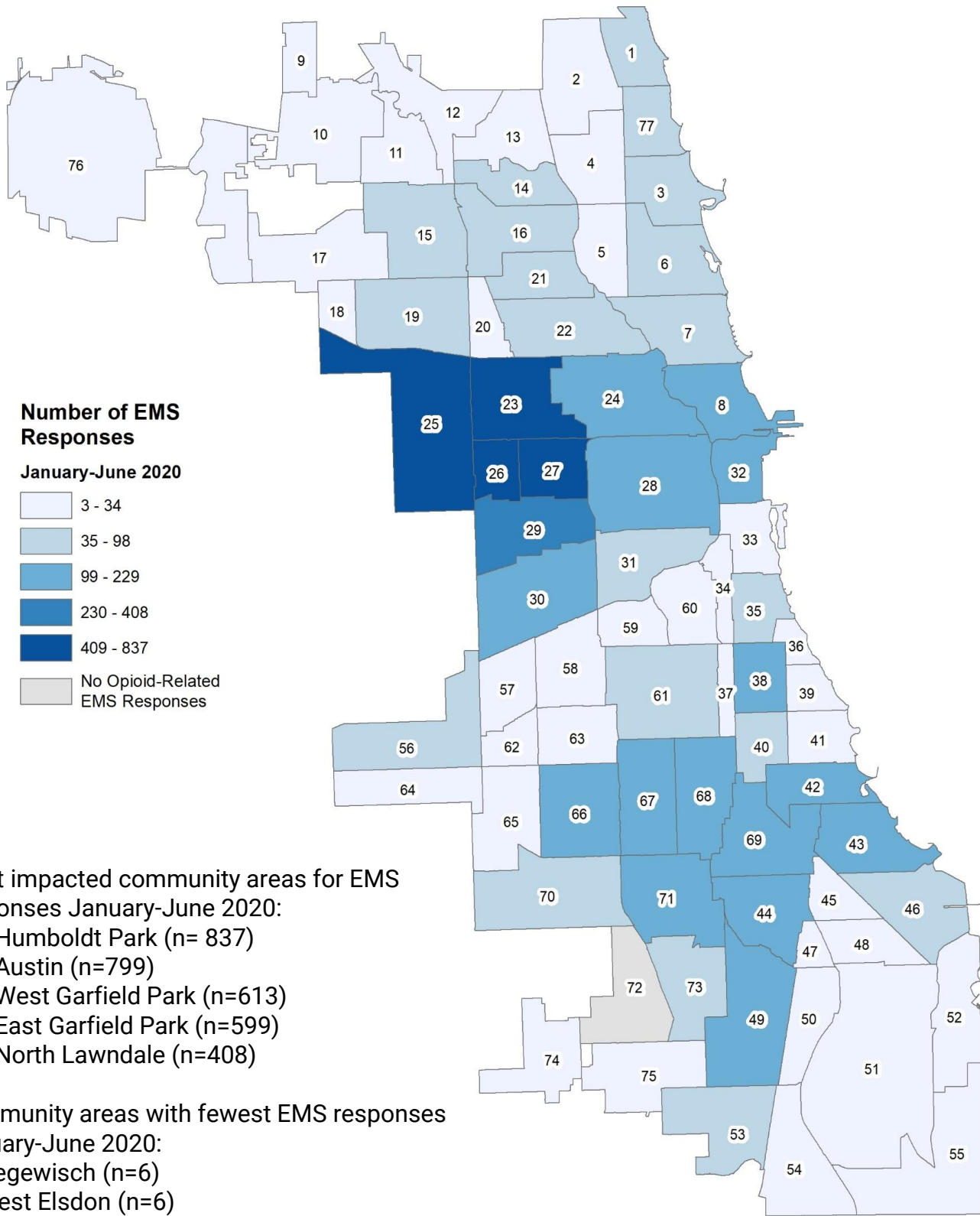
ⁱⁱ Rates are expressed as number of overdoses per 100,000 people in the population. Denominators are based on the 2010 census. Rates are age-adjusted to the 2000 US standard population.

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.

^{iv} In May, 3 deaths were missing race-ethnicity ^v In May, one death was missing data for age.

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

CFD EMS response for opioid-related overdose by community area of incident, Chicago January-June 2020



- Rogers Park
- West Ridge
- Uptown
- Lincoln Square
- North Center
- Lakeview
- Lincoln Park
- Near North Side
- Edison Park
- Norwood Park
- Jefferson Park
- Forest Glen
- North Park
- Albany Park
- Portage Park
- Irving Park
- Dunning
- Montclare
- Belmont Cragin
- Hermosa
- Avondale
- Logan Square
- Humboldt Park
- West Town
- Austin
- West Garfield Park
- East Garfield Park
- Near West Side
- North Lawndale
- South Lawndale
- Lower West Side
- Loop
- Near South Side
- Armour Square
- Douglas
- Oakland
- Fuller Park
- Grand Boulevard
- Kenwood
- Washington Park
- Hyde Park
- Woodlawn
- South Shore
- Chatham
- Avalon Park
- South Chicago
- Burnside
- Calumet Heights
- Roseland
- Pullman
- South Deering
- East Side
- West Pullman
- Riverdale
- Hegewisch
- Garfield Ridge
- Archer Heights
- Brighton Park
- McKinley Park
- Bridgeport
- New City
- West Elsdon
- Gage Park
- Clearing
- West Lawn
- Chicago Lawn
- West Englewood
- Englewood
- Greater Grand Crossing
- Ashburn
- Auburn Gresham
- Beverly
- Washington Heights
- Mount Greenwood
- Morgan Park
- O'Hare
- Edgewater

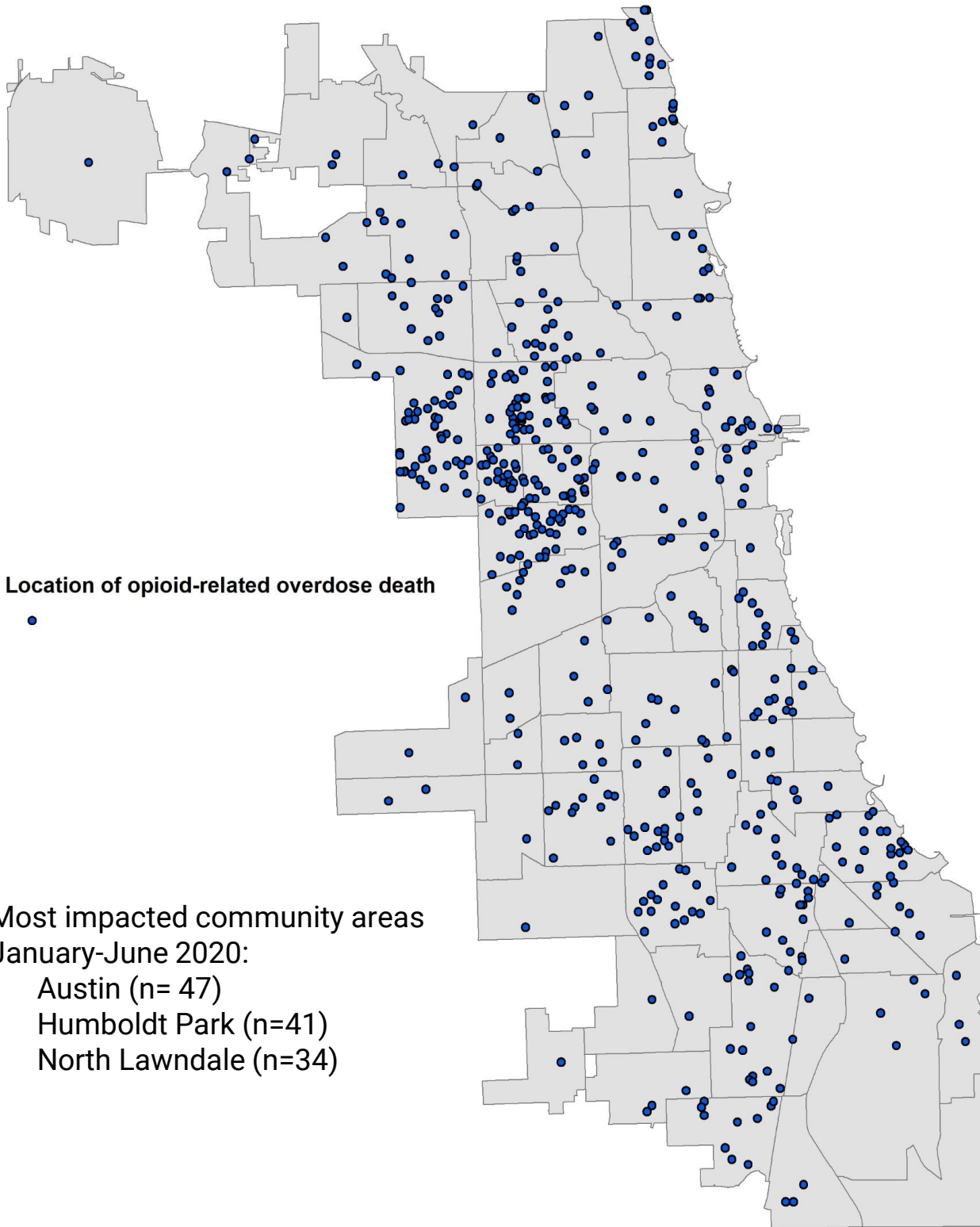
Most impacted community areas for EMS responses January-June 2020:

- Humboldt Park (n= 837)
- Austin (n=799)
- West Garfield Park (n=613)
- East Garfield Park (n=599)
- North Lawndale (n=408)

Community areas with fewest EMS responses January-June 2020:

- Hegewisch (n=6)
- West Elsdon (n=6)
- Forest Glen (fewer than 5)
- Mount Greenwood (fewer than 5)
- Edison Park (fewer than 5)

Opioid-Related overdose deaths that occurred in Chicago, January-June 2020 (n=573)



Location of opioid-related overdose death



Most impacted community areas
January-June 2020:

- Austin (n= 47)
- Humboldt Park (n=41)
- North Lawndale (n=34)

- 1 Rogers Park
- 2 West Ridge
- 3 Uptown
- 4 Lincoln Square
- 5 North Center
- 6 Lakeview
- 7 Lincoln Park
- 8 Near North Side
- 9 Edison Park
- 10 Norwood Park
- 11 Jefferson Park
- 12 Forest Glen
- 13 North Park
- 14 Albany Park
- 15 Portage Park
- 16 Irving Park
- 17 Dunning
- 18 Montclare
- 19 Belmont Cragin
- 20 Hermosa
- 21 Avondale
- 22 Logan Square
- 23 Humboldt Park
- 24 West Town
- 25 Austin
- 26 West Garfield Park
- 27 East Garfield Park
- 28 Near West Side
- 29 North Lawndale
- 30 South Lawndale
- 31 Lower West Side
- 32 Loop
- 33 Near South Side
- 34 Armour Square
- 35 Douglas
- 36 Oakland
- 37 Fuller Park
- 38 Grand Boulevard
- 39 Kenwood
- 40 Washington Park
- 41 Hyde Park
- 42 Woodlawn
- 43 South Shore
- 44 Chatham
- 45 Avalon Park
- 46 South Chicago
- 47 Burnside
- 48 Calumet Heights
- 49 Roseland
- 50 Pullman
- 51 South Deering
- 52 East Side
- 53 West Pullman
- 54 Riverdale
- 55 Hegewisch
- 56 Garfield Ridge
- 57 Archer Heights
- 58 Brighton Park
- 59 McKinley Park
- 60 Bridgeport
- 61 New City
- 62 West Elsdon
- 63 Gage Park
- 64 Clearing
- 65 West Lawn
- 66 Chicago Lawn
- 67 West Englewood
- 68 Englewood
- 69 Greater Grand Crossing
- 70 Ashburn
- 71 Auburn Gresham
- 72 Beverly
- 73 Washington Heights
- 74 Mount Greenwood
- 75 Morgan Park
- 76 O'Hare
- 77 Edgewater