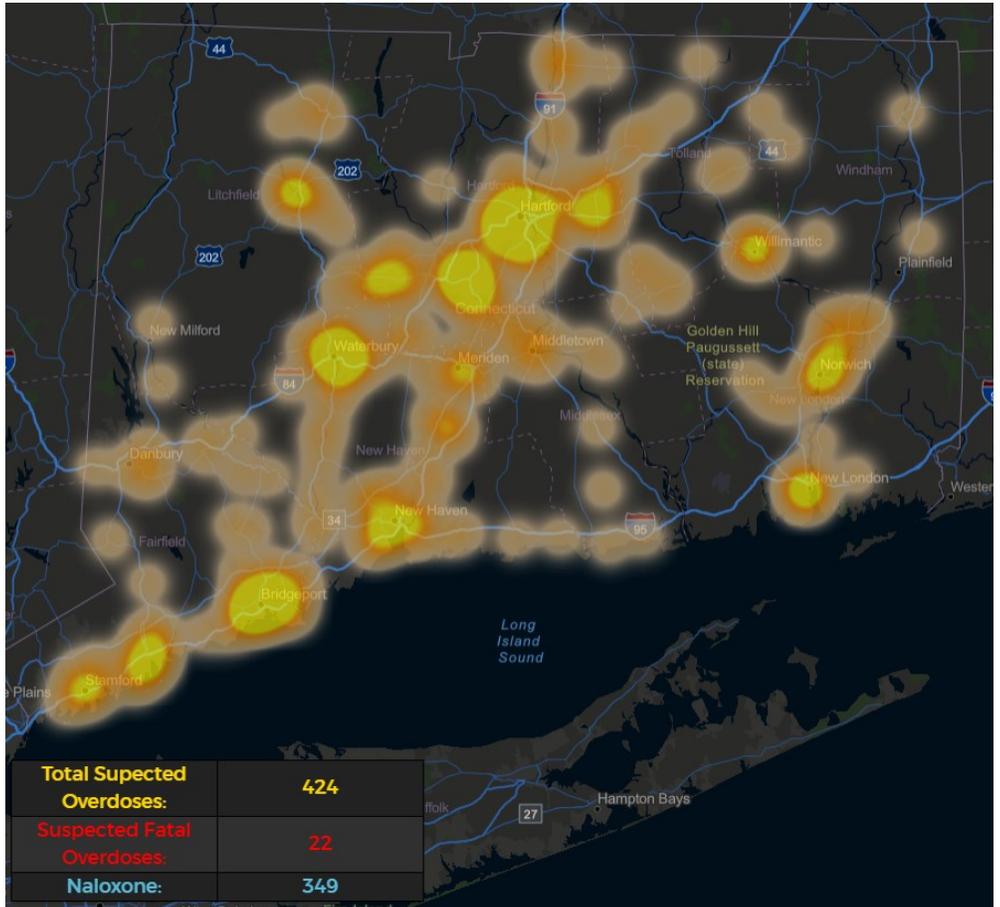
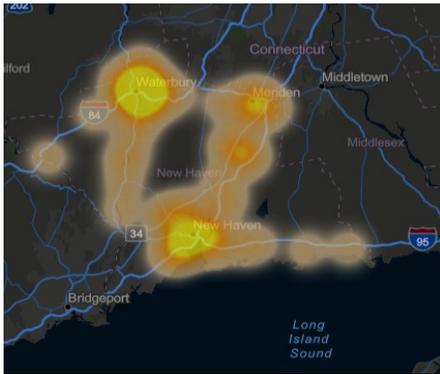


CT Opioid Heat Map

A heat map is a tool that provides data visualization and the strength or magnitude of the topic being displayed. Variation in color provides the viewer with indicators as to the intensity and location of the phenomenon.

The new ODMAP database, which produced this map, is capable of producing heat maps for cities, towns, and counties across the State.



New Haven County Heat Map, for January 2021, at left.

SWORD Spotlight

Kudos to American Ambulance Service and to Stamford EMS for being vigilant in their reporting efforts to Connecticut Poison Control Services.

Consistent and committed reporting translates into real outcomes as local public health entities, and their community partners look to ODMAP for real time data relating to opioid overdoses.

Look further in this month’s newsletter for reports that reveal data trends in Connecticut.

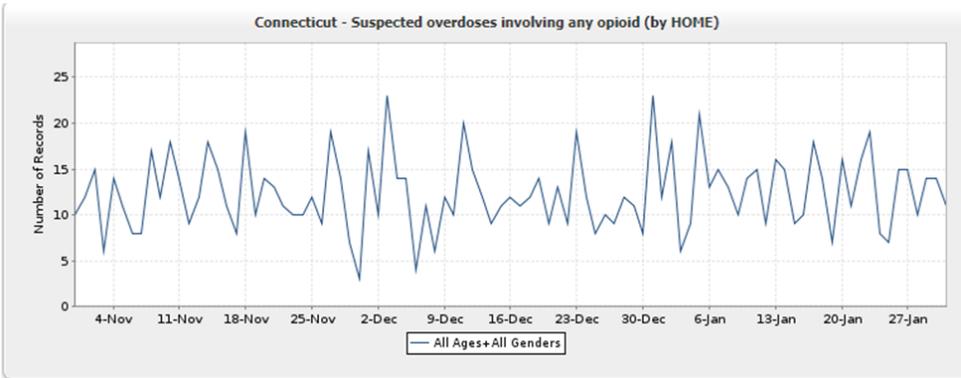


SWORD Reporting Translates into Real Results: Waterbury Health Dpt.

Jennifer L. DeWitt, LADC, LMFT, CAC CPS, OD2A Program Coordinator, Prevention Coordinator, Waterbury Health Department

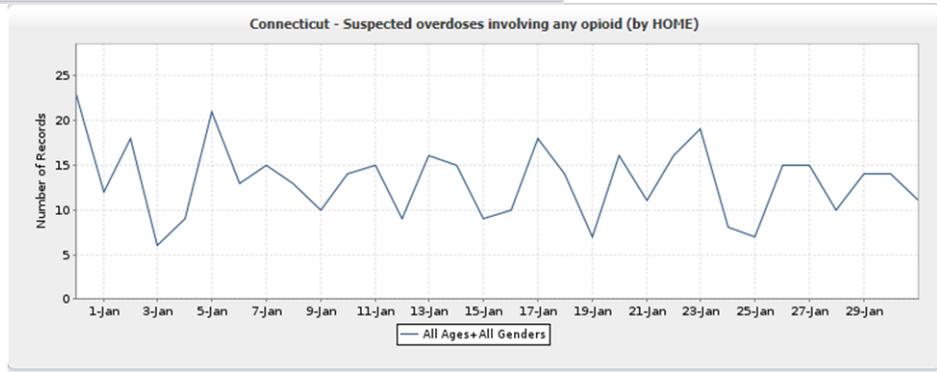
At the beginning of Waterbury’s response to the opioid crisis approximately five years ago, there was very limited real-time overdose reporting data that could allow immediate response and program adjustment to meet the needs of persons affected in this community.

We relied heavily on Syndromic Surveillance reporting, and separate data sets each collected by Waterbury police and Waterbury fire. Fast forward to

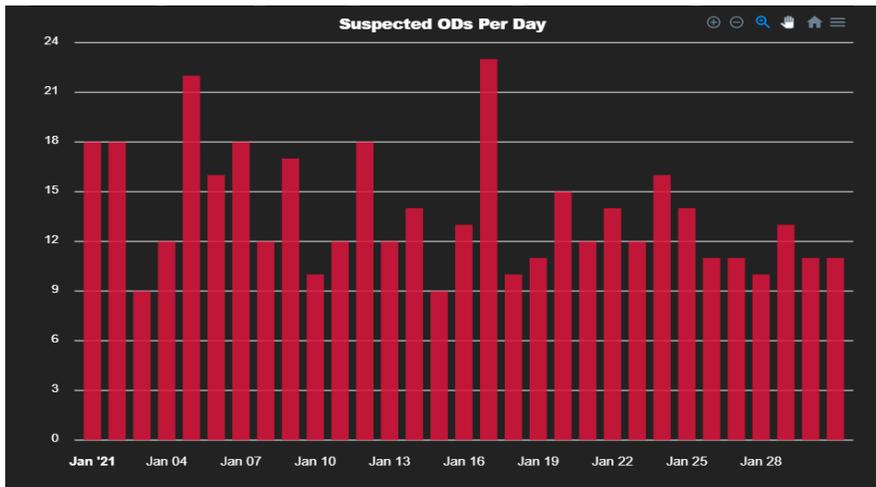


Left: > Three month view of overdoses involving any opioid for Jan. 2021

Right: > Daily suspected overdoses involving any opioid for Jan. 2021



Data, above, represents the total count of emergency department visits (Syndromic Surveillance) related to prescription and illicit opioid drug overdoses. Data reflects overdoses on town/city resident. It does not include non-resident overdoses. Data subject to change.



The graph, at left, represents EMS reported opioid overdoses by incident day during January.

SWORD Statewide Reporting January 2021

In the month of December 2020, there were 424 calls to the CT Poison Control Center (CPCC) for SWORD. Of these calls, 404 were non-fatal and 23 resulted in fatalities. There were 349 total naloxone administrations: 181 non-fatal multiple doses of naloxone administered, 155 non-fatal single dose naloxone, and 63 non-fatal with no naloxone administered. There were three (3) non-fatal with “unknown” naloxone administered. Of the 23 fatalities, eight (8) received multiple doses of naloxone, five (5) received single dose, and nine (9) with no naloxone administered. The gender breakdown for the state is: Male (319); Female (103) and (5) unknown.

The 424 cases involved suspected overdoses from all of our counties: Fairfield (92), Hartford (150), Litchfield (22), Middlesex (15), New Haven (86), New London (37), Tolland (12), and Windham (13). The age breakdown of the patients is as follows: 0 to 18 years of age (5); 19 to 24 years of age (27); 25 to 34 years of age (113); 35 to 44 years of age (116); 45 to 54 years of age (79); 55 to 64 years of age (63); 65 years of age and older (18); age unknown (6).

*Numbers subject to change

*TIP: Store the CPCC number in your cell for ease of use! 1-800-222-1222

cont. from pg. 1: Waterbury Health Dpt.

the creation of ODMAP and the various features of this tool that allow for not only real-time county-based overdose spike alerts, but also provide important information such as bag stamps on-scene that helps our public safety and response efforts to more clearly understand the prevalence and lethality of illicit drugs on the street, and allows community providers to improve and further coordinate outreach and communication to at-risk persons and the places where they congregate.

Beginning in March, quarterly data surveillance meetings will be conducted with key representatives of all Waterbury emergency services: police, fire, Northwest dispatch, public health, and both AMR and Trinity ambulance companies. Stakeholders will sit down to examine the data provided through SWORD and other sources to set response goals for education,

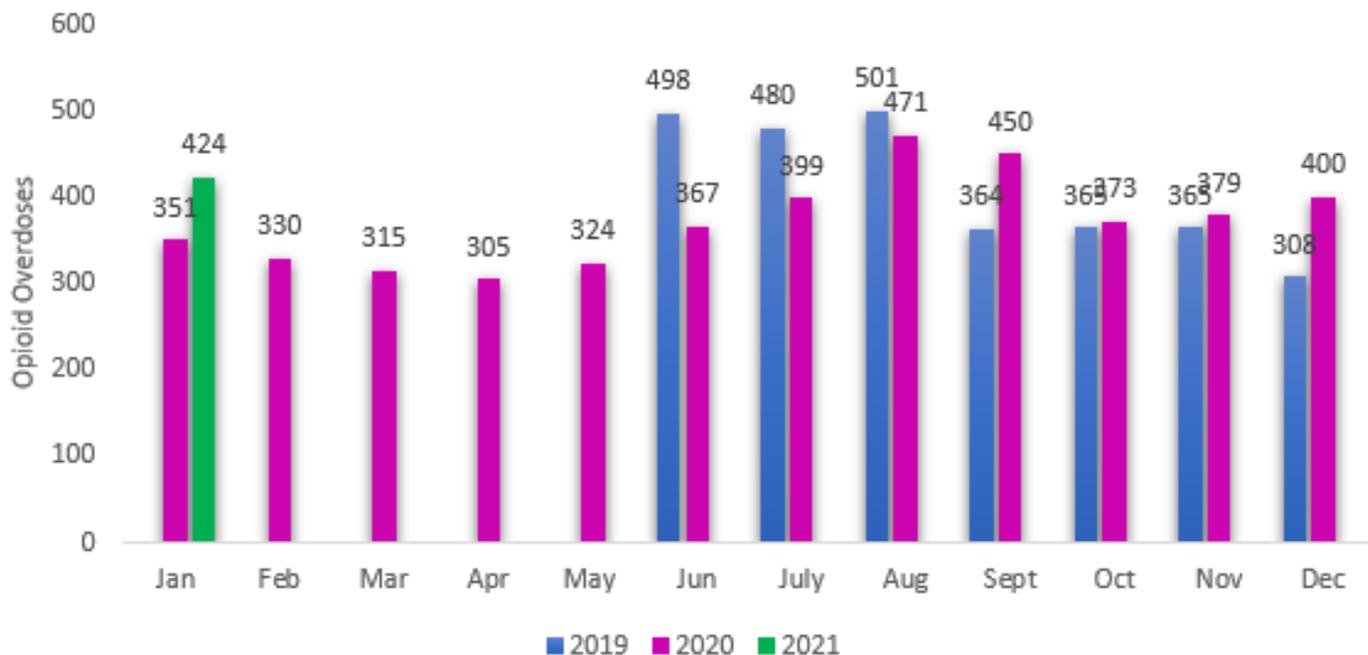


City of Waterbury Dept. of Health Team

harm reduction, proactive patrols, community outreach, and naloxone training/administration.

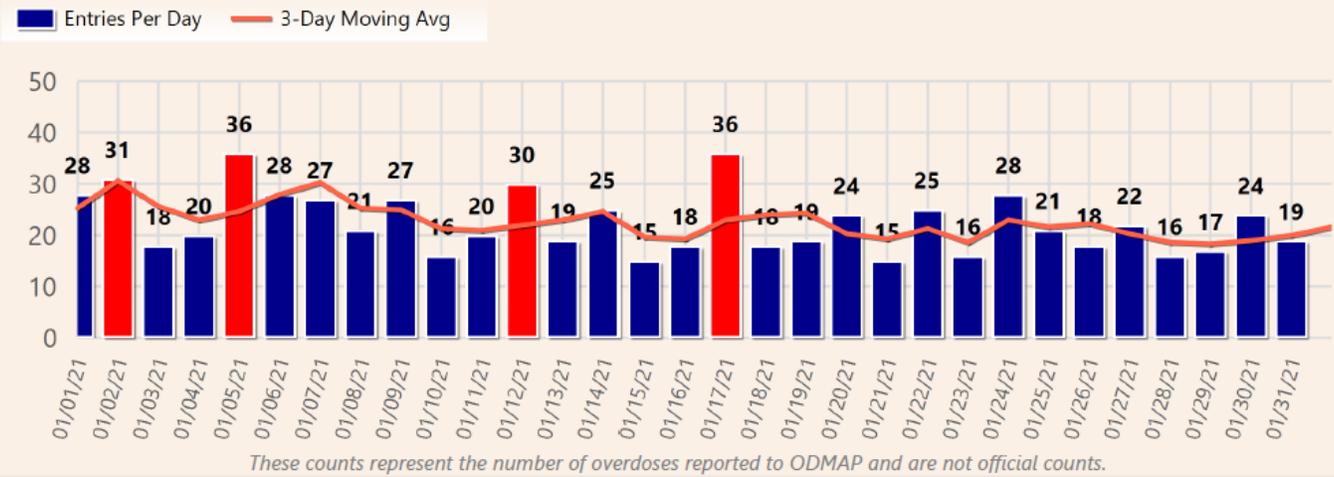
Since January 1, 2021 30 persons have been served by outreach workers and harm reduction services, and 12 individuals have been connected to various levels of care by the overdose response team, including substance use and medication assisted treatment, drug detox programming, housing, or behavioral health services.

Suspected OD's by month June 2019-January 2021



This graph shows the total suspected overdoses (fatal and non-fatal) called into CPCC by month since June 2019 (These numbers were transcribed from the ODMAP database system 2/3/2021)
The Statewide Reporting Directive began across the State on June 1, 2019

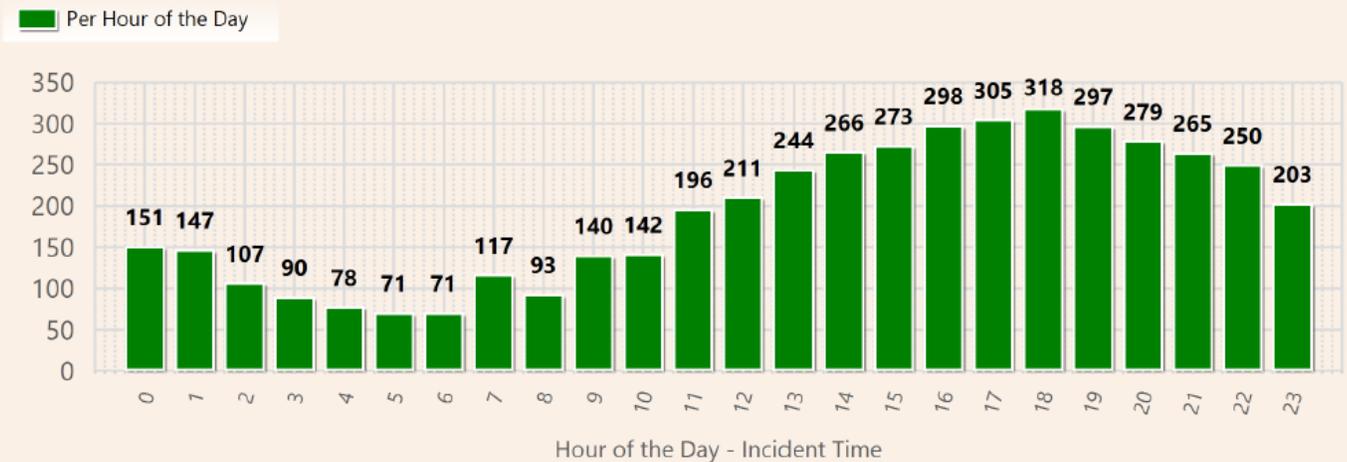
ODMAP Suspected Overdose Submissions - In the Last Month



ODMAP Suspected OD Submissions by day.

This graph shows total suspected overdoses called in each day during the time period. The red line running horizontally shows a 3-day moving average of call-ins.

ODMAP Suspected Overdose Submissions - All Data Submitted



Cumulative (June—December, 2020) Overdoses by the Hour of the Day

This graph shows the hour of the day suspected overdose incidents have occurred statewide since the SWORD program began on June 1, 2019.

Note: All data in this newsletter come from reports made by CT EMS and can be viewed in ODMAP Level 2

Data a Deeper Dive

Naloxone, an antidote for opioid poisoning, is known to cause adverse side effects in some patients, particularly those who are chronic opioid users, by putting them into opioid withdrawal if given in excessive amounts. Using SWORD data we examined the rate of side effects from single dose naloxone administration for suspected opioid overdose in Hartford, Connecticut for the period of June 1, 2019 to December 31, 2019.

Results:

A total of 239 suspected nonfatal overdoses in the city of Hartford were reported to the Connecticut Poison Control Center during the study period of 7 months in which only a single dose of naloxone was administered. Of these 239 overdoses, 179 received the dose by the intranasal (IN) route, 40 by the intravenous route (IV) and 20 by the intramuscular (IM) route. 30.5% of patients suffered adverse side effects (nausea, vomiting, agitation, and other withdrawal symptoms); 17.5 % had side effects when the dose was given IV; 30% had side effects when given IM; and 33.5% had side effects when given IN. 20.5% of those who received 2 mg IN (7 of 34) had side effects versus 38.1% who received 4 mg IN (53 of 139). 6 patients who received doses of 0.5 mg (1) and 1 mg (5) via the intranasal route suffered no adverse effects.

Conclusions:

33.5% of suspected opioid overdose patients suffered adverse effects after receiving a single dose of naloxone. Patients receiving 4 mg IN were nearly twice as likely as those receiving 2 mg IN to suffer adverse effects. EMS services who respond to the scene of an opioid overdose, should consider the potential for side effects when determining the route of naloxone administration. For those services who only administer

naloxone via the intranasal route, consideration should be given to using the 2 mg dose instead of the 4 mg dose provided rescuers are able to ventilate the patient with a bag-valve mask while waiting for the naloxone to take effect.

Future:

We are developing a larger research proposal, in conjunction with UConn Health, to determine if the results from this limited study hold true on a statewide scale.

Glassine Bags



A glassine heroine bag, "Hall Pass," is pictured at right. This logo was recently associated with a number of overdoses in Connecticut.

Do you need help accessing ODMAP Level 1 (Spike Alert Level) or Level 2 (Map Level)?

[Click here to contact the ODMAP Helpdesk](#), or call (301) 489-1744



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Department of Public Health

Office of Emergency Medical Services

[Click here](#) to contact OEMS regarding the SWORD program,

ODMAP, or feedback, [Click here](#) to check out the SWORD page on our website

Thank you for your participation!

