DC VS REST OF AMERICA

- Very different core group of users
- Average Opioid addict is older (>50 years), less racially diverse
- Long history of use
- Concentrated in smaller enclaves within the city
ED SURVEILLANCE

- De-identified
- Based on a combination of chief complaint and discharge diagnosis
- Running count over time
- Can also look at patients with a history of opioid abuse presenting with another health issue
Overdose-Related ED Encounters, 2017 to 4/25/21 (n=3,880)
SNAPSHOT

- Average age 52 (Non-DC residents 45, Wards 2 and 3 are also younger at 43 for 2020. Ward 5 is the oldest at 54)

- Overall decline from 53 to 49 in average in (2021), driven largely by Ward 2

- Gender is consistent- 70% male, 30% female

- Historically from mostly Wards 5, 7 and 8, but since 2020, Ward 2 now accounts for 22%
FEMS DATA

- Includes X-Y coordinates, better location
- Naloxone administrations with documented improvement
- Based on Impression from First Responder
- Identifiable information
SIGNING UP FOR ODMAP

New users go to:

• Odmap.hidta.org
• Click register new user
• Enter your information
• WTG8Y37 for agency code
TYPICAL EMS TRANSPORT

32% ON AVERAGE DECLINE TRANSPORT

- 49 years of age
- 88% African American
- 70/30 resident/ non-resident
- Rise in repeat overdoses during 2020
REPEAT OVERDOSERS

RISING PROPORTION OF OVERDOSES

• ~20 % have had multiple overdoses in a 12 month period
• Max was 8 for 2020
• Average time in between events is about 3 months
• Shortest was one day
• Biggest predictor is location (known hotspot) and previous refusal
DC SUDORS (STATE UNINTENTIONAL DRUG OVERDOSE REPORTING SYSTEM)

COLLABORATION BETWEEN DC HEALTH AND OCME

Looks at circumstances surrounding fatal overdoses

- Bystanders present in about 30% of deaths
- Most fatalities did not receive naloxone
- Toxicology is >95% fentanyl
- Poly-substance use is very common
- Most people die at home
LINKAGE TO PREVENTION

• 2 key roles
  - Detect and warn of unusual patterns
  - Feed data for targeted interventions
• SBIRT. Can be applied to multiple drugs
• Evaluation of treatment effectiveness
Goal 7.1: Enhance surveillance program and data collection efforts in order to determine and characterize status of the regional supply of illegal drugs to ensure availability of sufficient data.

As part of the Live. Long. DC. Strategic Plan, the DFS has:

1. Secured CDC Opioid CoAg for 4 years (Overdose Data to Action)
2. Established a surveillance program
3. Monthly synthetic opioid reports for DC and other stakeholders
4. Released timely intel bulletins on emerging drugs in the District
5. Engaged with community groups to share surveillance information
### METRICS

<table>
<thead>
<tr>
<th>Workload Metric</th>
<th>FY18</th>
<th>FY19</th>
<th>FY20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Items Tested</td>
<td>1,177</td>
<td>2,073</td>
<td>2,090</td>
</tr>
<tr>
<td>Cases</td>
<td>481</td>
<td>890</td>
<td>898</td>
</tr>
</tbody>
</table>

- 6 FTE (1 Supervisor, 5 Chemists)
- 4 FTE (1 Stats/Case Coordinator, 3 Chemists)
- Average TAT 31.6 days (case in to report out)
- 100% of cases reported within 60 days of receipt of evidence

---

**Coverage of MPD Suspected Heroin Exhibits in FY18 - FY20**

- 2018: 0%
- 2019: 20%
- 2020: 80%
1. DRUG SUPPLY

Suspected Drug Exhibit is Recovered by Law Enforcement

Request for Forensic Chemistry Analysis

Surveillance Query

Transferred to FCU Staff Custody

Bench Chemist Analysis

Confirmed to Contain Fentanyl

Drug Supply

Suspected Drug Exhibit

Drug Supply Surveillance Query

Drug Supply Analysis

Drug Supply Report
OPIOID TRENDS

FY2018

FY2019

FY2020
OPIOID DISTRIBUTION (1 YEAR)
OPIOID TRENDS (SINCE 2018)

Heroin, Fentanyl-Adulterated Heroin, and Fentanyl in Opioid Powder Exhibits

Recovery Date

- Fentanyl Confirmed Without Heroin
- Heroin Confirmed Without Fentanyl
- Fentanyl-Adulterated Heroin

DC Department of Forensic Sciences
Forensic Science Laboratory | Public Health Laboratory | Crime Scene Sciences
GOVERNMENT OF THE DISTRICT OF COLUMBIA
MURIEL BOWSER, MAYOR
FENTANYL TRENDS* (SINCE 2018)

*Excluding 4-ANPP, a precursor to fentanyl
SYRINGE SURVEILLANCE MODEL

- Cocaine
- Fentanyl
- Cocaine + Fentanyl
FENTANYL PILLS

Pills Physically Identified as Oxycodone Recovered in 2019

Pills Physically Identified as Oxycodone Recovered in 2020

<table>
<thead>
<tr>
<th>Year</th>
<th>Proportion of Pills Containing Fentanyl</th>
<th>Counterfeit Oxycodone containing Fentanyl</th>
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</thead>
<tbody>
<tr>
<td>FY19</td>
<td>0.97%</td>
<td>6.4%</td>
</tr>
<tr>
<td>FY20</td>
<td>17%</td>
<td>43%</td>
</tr>
<tr>
<td>FY21</td>
<td>13%</td>
<td>40%</td>
</tr>
</tbody>
</table>

REAL

FAKE!
DRUG SURVEILLANCE MODEL

JANUARY 2019
Fentanyl + Cocaine Polysubstance Items by Source

INCREASE IN POLYSUBSTANCE SEIZED DRUGS

MID-APRIL 2020

SEPTEMBER 2020
INCREASE IN POLYSUBSTANCE SYRINGE EXCHANGE

MID-JANUARY 2021

Proportion of Items per Day

Recovery Date

Seized Drugs  Syringe Exchange Survey
SYNTHETIC CANNABINOIDs

SCA Tested from April 2020 to April 2021

Exhibits Found to Contain SCA
(April 2020 to April 2021)

<table>
<thead>
<tr>
<th>Substance</th>
<th>Exhibit Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>MDMB-4en-PINACA</td>
<td>74</td>
</tr>
<tr>
<td>4-Fluoro MDMB-Butinaca</td>
<td>21</td>
</tr>
<tr>
<td>5-Fluoro MDMB-PICA</td>
<td>15</td>
</tr>
<tr>
<td>5-Fluoro EMB-PICA</td>
<td>9</td>
</tr>
<tr>
<td>4-Fluoro MDMB-BUTICA</td>
<td>6</td>
</tr>
<tr>
<td>ADB-BUTINACA</td>
<td>5</td>
</tr>
<tr>
<td>5-fluoro MPP-Pica (MPHP2201)</td>
<td>4</td>
</tr>
<tr>
<td>Fentanyl</td>
<td>1</td>
</tr>
<tr>
<td>FUB-144</td>
<td>1</td>
</tr>
<tr>
<td>MMB-Fubinaca (FUB-AMB)</td>
<td>1</td>
</tr>
</tbody>
</table>

Exhibit Count
QUESTIONS?