Kentucky Substance Use Research & Enforcement

Using data to drive public safety and public health efforts against substance use across the Commonwealth

Brief: Five Major Overdose Related Substances in Kentucky, January 1, 2017 – June 30, 2018

Possession and Trafficking Citations, Drug Overdose Related Deaths, Emergency Department Visits, Hospitalizations, and State Police Lab Submissions
Produced by the Kentucky State Policy Intelligence Branch; and, the Kentucky Injury Prevention and Research Center (KIPRC), as bona fide agent for the Kentucky Department for Public Health.

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Data are provisional and subject to change. Possession Citations are comprised of KRS: 35120; 35121; 42195; 42196; 42205; and 42206. Trafficking Citations are comprised of KRS: 35100; 35101; 42105; 42106; 42376; 42377; 42378; 42379; 42466; 42468; 42470; 42480; 42483; and 42486. The number of citations could be greater than the number of individuals cited; citations are with over 90 percent law enforcement agencies reporting. Deaths are based on drug overdose related deaths among Kentucky residents. Drug overdose related hospitalizations represent encounters of care among Kentucky residents and could be greater than the number of individual patients treated in acute care facilities. Drug overdose related emergency department visits represent encounters of care among Kentucky residents and could be greater than the number of individual patients treated. To avoid duplicate counts, emergency department visits excluded visits resulting in hospitalizations. Tested Lab Submission data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding timeframe; submission date is not reflected.

Data sources: Kentucky Open Portal System; Kentucky Death Certificate Database, Cabinet for Health and Family Services, Office of Vital Statistics; Kentucky Outpatient Claim Files, Cabinet for Health and Family Services, Office of Health and Data Analytics; Kentucky Inpatient Hospitalization Claims Files, Cabinet for Health and Family Services, Kentucky Office of Health and Data Analytics; Kentucky State Police Crime Laboratory.

Key Findings:

- Statewide decrease of 32.5% in heroin-related emergency department visits from the first half of 2017 to the second half of the year. KSP naloxone field implementation started in July 2017. Increased availability of naloxone may be attributed to decrease in emergency department visits related to heroin. In addition, EMS naloxone administration runs that were not transported to the emergency department increased over the same period.

- Heroin trafficking citations increased by 7.7% when comparing the second quarter of 2018 to the second quarter of 2017. The increase in heroin trafficking citations in this timeframe may be indicative of law enforcement causing change in the supply levels that could affect heroin overdose events. Preventing the supply from reaching the user would cause a decrease in other heroin related events.

- Heroin related deaths decreased by 53.5% in the first half of 2018 when compared to the first half of 2017, and hospitalizations by 49.2% among Kentucky residents.

- Statewide decrease in heroin related events in regards to possession citations, overdose deaths, emergency department visits, hospitalizations, and tested lab submissions when comparing the first half of 2017 to the first half of 2018.
Data are provisional and subject to change. Possession Citations are comprised of KRS: 35220; 35221; 42197; 42198; 42209; and 42210. Trafficking Citations are comprised of KRS: 35200; 35201; 42109; 42110; 42372; 42373; 42374; and 42375. The number of citations could be greater than the number of individuals cited; citations are with over 90 percent law enforcement agencies reporting. Deaths are based on drug overdose related deaths among Kentucky residents. Opioid related emergency department visits and hospitalizations do not include heroin. Drug overdose related hospitalizations represent encounters of care among Kentucky residents and could be greater than the number of individual patients treated in acute care facilities. Drug overdose related emergency department visits represent encounters of care among Kentucky residents and could be greater than the number of individual patients treated. To avoid duplicate counts, emergency department visits excluded visits resulting in hospitalizations. Tested Lab Submission data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding timeframe; submission date is not reflected. Tested Lab Submission Opioid data represents Oxycodone, Hydrocodone, and Buprenorphine numbers only.

Data sources: Kentucky Open Portal System; Kentucky Death Certificate Database, Cabinet for Health and Family Services, Office of Vital Statistics; Kentucky Outpatient Claim Files, Cabinet for Health and Family Services, Office of Health and Data Analytics; Kentucky Inpatient Hospitalization Claims Files, Cabinet for Health and Family Services, Kentucky Office of Health and Data Analytics; Kentucky State Police Crime Laboratory.

Key Findings:

- Statewide opioid possession and trafficking citations have decreased 22.6% when comparing the first half of 2017 to the first half of 2018.
- Opioid-related hospitalizations decreased by 11.5% from the first half of 2017 to the first half of 2018, opioid-related deaths by 20.7%, and emergency department visits by 25.5% among Kentucky residents.
- Statewide opioid related events slightly decreased, from the first half of 2017 to the first half of 2018 but use, misuse, and distribution remain prevalent across Kentucky.
Key Findings:

- Statewide methamphetamine possession and trafficking citations have increased 26.4% when comparing the first half of 2017 to the first half of 2018. According to the DEA’s 2013 National Drug Threat Assessment Summary, price and purity data and increased methamphetamine flow across the southwest border of the United States produced a rise in domestic availability. Their 2018 National Drug Threat Assessment continues to reflect this trend.

- Methamphetamine related drug overdose deaths have increased 10.1% when comparing the first half of 2017 to the first half of 2018. All methamphetamine-related overdose deaths involved polysubstance use among Kentucky residents.

- Methamphetamine continues to be the most commonly submitted drug to KSP laboratories accounting for 40% of tested lab submissions in the first two quarters of 2018.

- Methamphetamine use, misuse, and distribution has increased, which may reflect an increase in the substance purity, affordability, and availability.
Key Findings:

- Statewide cocaine possession citations have increased 3.2% when comparing the first half of 2017 to the first half of 2018.
- The number of cocaine-related overdose deaths and emergency department visits remained relatively constant from January 2017-June 30, 2018, among Kentucky residents.
- The number of hospitalizations resulting from cocaine-related overdoses decreased by almost half from the first half of 2017 to the first half of 2018 among Kentucky residents.
- In 2017, cocaine accounted for 10% of the total tested lab submissions to KSP Laboratories. In the first half of 2018, this percentage was fairly equivalent at 9% of total tested lab submissions.
Key Findings:

- Statewide fentanyl and fentanyl analog trafficking citations increased 6.7% when comparing the first half of 2017 to the first half of 2018.
- Fentanyl and fentanyl analog related overdose deaths decreased by 6.6% among Kentucky residents from the first half of 2017 to the first half of 2018.
- Tested lab submissions increased 12% when comparing the first half of 2017 to the first half of 2018. KSP Laboratory continues to see several different fentanyl derivatives in casework along with poly-drug mixtures including heroin/fentanyl mixtures as well as heroin/fentanyl/stimulant and heroin/fentanyl/hallucinogen mixtures.