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New data show growing complexity of drug overdose deaths in America

In-depth analysis confirms sharp increases, geographic spread of synthetic opioid-related deaths

U.S. overdose death rates linked to synthetic opioids, likely from illicitly manufactured fentanyl (IMF), increased more than 45 percent from 2016 to 2017 while death rates from heroin and prescription opioids – still far too high – remained stable.

The findings come from an in-depth CDC analysis of the latest available drug overdose death data and expands upon data released in November by the National Center for Health Statistics. The report, published online today in an early release from CDC's *MMWR*, analyzes the growing number of U.S. drug overdose deaths from 2013 to 2017, and by demographic and geographic characteristics from 2016 to 2017. More than 702,000 Americans have died from drug overdoses from 1999 to 2017 – about 10 percent of them in 2017 alone.

“The drug overdose epidemic continues to evolve, with the involvement of many types of drugs including opioids, cocaine, and psychostimulants,” said Debra Houry, M.D., M.P.H., director of CDC's National Center for Injury Prevention and Control. “This underscores the urgency for more timely and localized data to inform public health and public safety action.”

Synthetic opioid deaths expanded in 2017

Opioids were involved in over two-thirds of overdose deaths in 2017. Of the 35 jurisdictions reporting data sufficient for analysis, 23 states and the District of Columbia saw increased rates of death linked to synthetic opioids. IMF likely drove the 1.5-fold increase in deaths involving synthetic opioids from 2016 to 2017.

Previously, deaths involving synthetic opioids mainly occurred east of the Mississippi River. The latest available data now show eight states west of the Mississippi had significant increases in such deaths: Arizona, California, Colorado, Minnesota, Missouri, Oregon, Texas, and Washington.

While overdose deaths involving synthetic opioids expanded, heroin- and prescription-opioid-involved deaths remained stable from 2016 to 2017. However, overdose death rates involving heroin and prescription opioids were, respectively, seven and four times higher in 2017 than in 1999.

Some preliminary indicators in 2018 point to possible improvements based on provisional data; confirmation will depend on final 2018 data and results of pending medical investigations.

The drug overdose epidemic grew and evolved in 2017

There were more than 70,000 drug overdose deaths in 2017, with a rate of 21.7 per 100,000 population. The rate increased by nearly 10 percent from 2016.

The rates of overdose deaths involving cocaine increased by more than 34 percent. The rate of overdose deaths involving psychostimulants increased by more than 33 percent.

Opioid death rates differed across the states examined in this study, with the highest relative increases occurring in North Carolina, Ohio, and Maine. From 2016 to 2017, opioid-involved deaths:

- . Increased for both sexes.
- . Increased among all people in all age groups over the age of 25.

- . Increased among white, black, and Hispanic people.
- . Had the largest absolute death rate increase in males 25-44.

The largest percent change increases in opioid-involved death rates were among blacks (25.2 percent) and adults over age 65 (17.2 percent).

What is being done?

A whole of government approach is being led by the U.S. Department of Health and Human Services (HHS) to prevent and respond to drug overdoses, specifically those involving opioids. The HHS five-point strategy provides: better treatment, better data, better research, increased access to naloxone, and better pain management. Within HHS, CDC conducts surveillance and research; builds state, local, and tribal capacity for prevention; supports providers, health systems, and payers; partners with public safety; and empowers consumers to make safe choices.

“Drug overdose and opioid-involved deaths are a critical public health issue. It is important for CDC to share these data so states and communities have the information needed to inform their prevention activities and better respond,” said the report’s lead author and epidemiologist Lawrence Scholl, Ph.D., National Center for Injury Prevention and Control.

CDC is working with states across the country through the [Enhanced State Opioid Overdose Surveillance \(ESOOS\)](#) program to develop a multifaceted approach for faster and more comprehensive surveillance to track emerging threats in order to prevent and respond to the epidemic.

Today’s report also reinforces the continued need for response strategies including increasing naloxone availability, educating patients and providers about safe prescribing practices, reducing the syndemic of infectious diseases and opioid overdoses, providing patients with linkage into treatment, and fostering greater collaboration between public health and public safety.

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