

Agence de la santé publique du Canada



NL Substance Use-Related Harms Surveillance:

The Role of a Public Health Officer and Surveillance
Data Updates - 2023

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Main Objective:

 Build and maintain a positive relationship with the OCME to complete death investigation data reporting and help build OCME reporting capacity

Two PHAC streams in one:

- Substance-related Harms
- Public Health Death Investigation

Additional Support:

- Acting Data Analyst for the OCME through agreement with PHAC;
- 3 jobs in 1!

Substance Related Harms:

- Provide national and provincial reporting of drug toxicity deaths with a focus on opioid and stimulant related deaths
- Build in-house databases and reporting tools (such as dashboards) for the Chief Medical Examiner
- Provide support provincially by joining working groups such as the Alcohol Action Plan and Suicide Action Plan

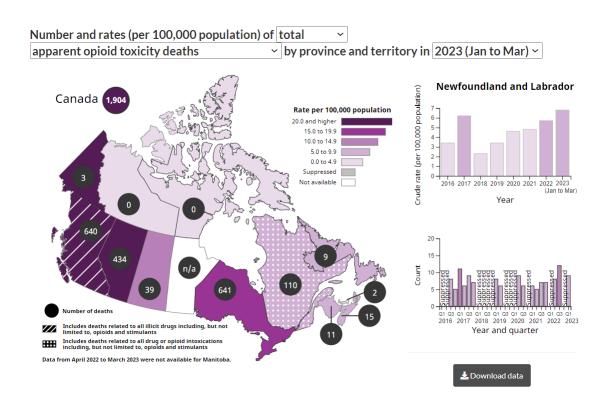
Public Health Death Investigation:

- Support a national Chief Coroner and Chief Medical Examiner Collaboration supported by PHAC
- Sitting on death investigation subgroups (suicide, polydrug deaths)
- Connect local analytics team with national R and Python training
- 2022/2023 highlights → Getting NL data online with the StatCan CCMED database and procured funding to aid in an in-house data analyst and new electronic DBMS

Other Highlights:



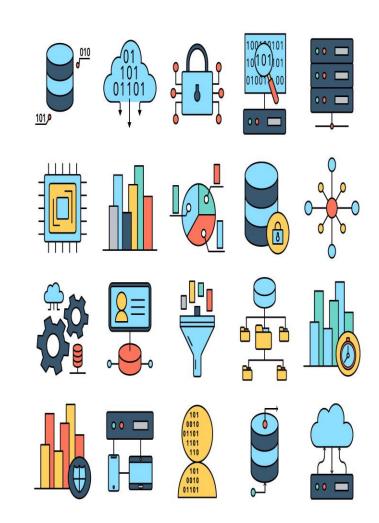
- Collaboration with Department of Research and Innovation to procure funding and hire Information Scientist
 - » This will allow for more granular data analysis and academic manuscript publications
 - » The Analyst, Information Scientist and Public Health Officer will work together to enhance OCME reporting and data products
- New public-facing annual statistics report and infographics (2021 coming soon!)



PHAC InfoBase: National opioid and stimulant death reporting tool

https://health-infobase.canada.ca/substance-related-harms/opioidsstimulants/

- Providing mortality data to DHCS, MH&A, NLCSU, NLCHI and other stakeholders to aid in policy, planning, and reporting
- Providing substance-related pharmacy data reporting to stakeholders
 - Opioid Dependency Treatment dispenses/ patients/ prescribers/ etc.



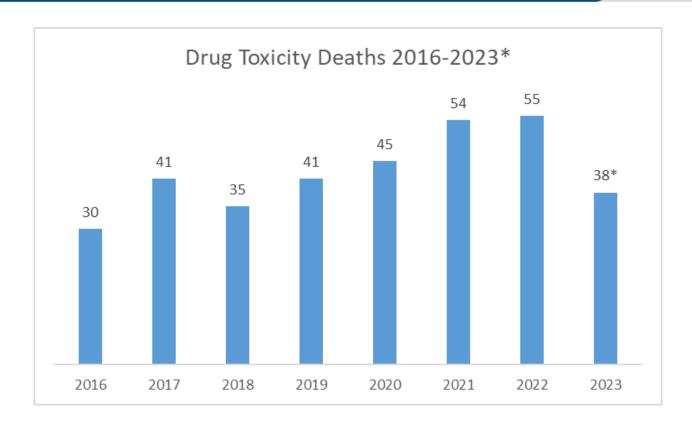
 Review and clean OCME data for current reporting window (2021 onwards) to increase accuracy of data into the future

Limitations:

- For any public facing data, values less than 5 (such as death counts per month and by health region) must be suppressed to limit risk of re-identification of individuals
- Toxicology is done out of province (the same for Atlantic provinces) in Pennsylvania
- Can only provide data on closed cases
- Cannot comment on anecdotal information or pending cases

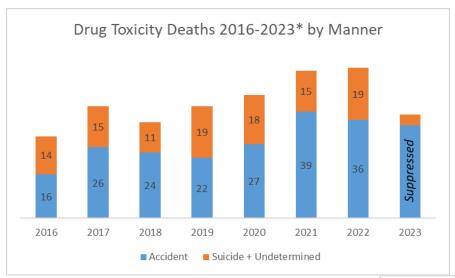
2023 Drug Toxicity Data Updates

Drug Toxicity Deaths



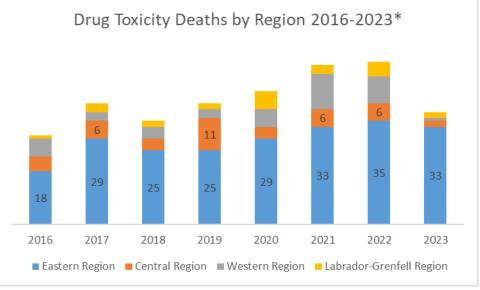
- We see a slight but steady increase in the number of deaths in this province each year since 2017
- Includes all-substance drug toxicity deaths
- *2023 cases are ongoing

Drug Toxicity Deaths

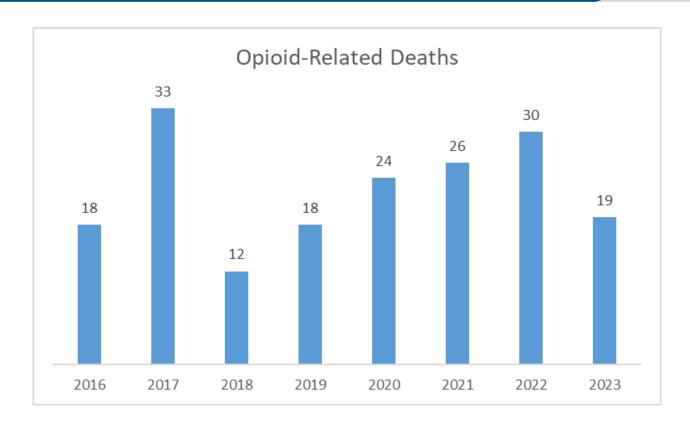


- Most drug toxicity deaths are considered accidental (seen nation-wide)
- Eastern Health has the biggest proportion of deaths

*** When values are <5, or a single value can be back-calculated, data is suppressed

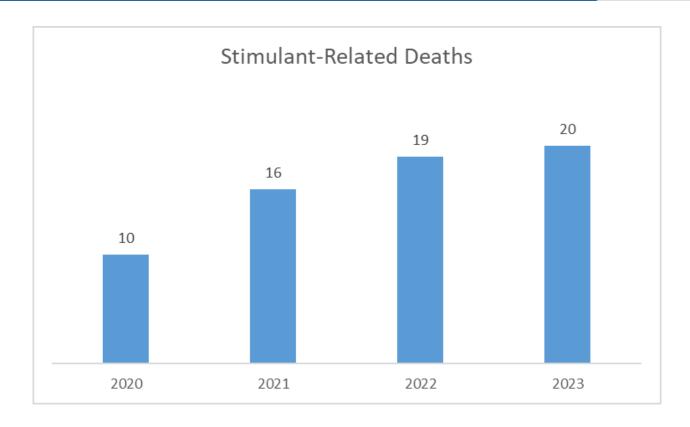


Opioid Deaths



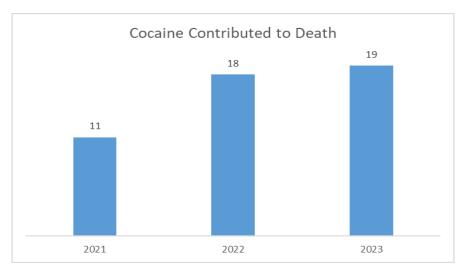
- Cases where at least 1 opioid contributed to death
- Some opioid deaths also involved stimulants
- 2023 cases are ongoing

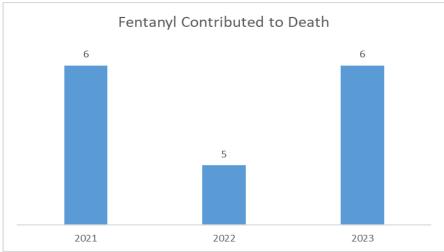
Stimulant Deaths



- National Stimulant-related death reporting started after opioid reporting
- Cases where at least 1 stimulant contributed to death
- Some stimulant deaths also involved opioids
- 2023 cases are ongoing

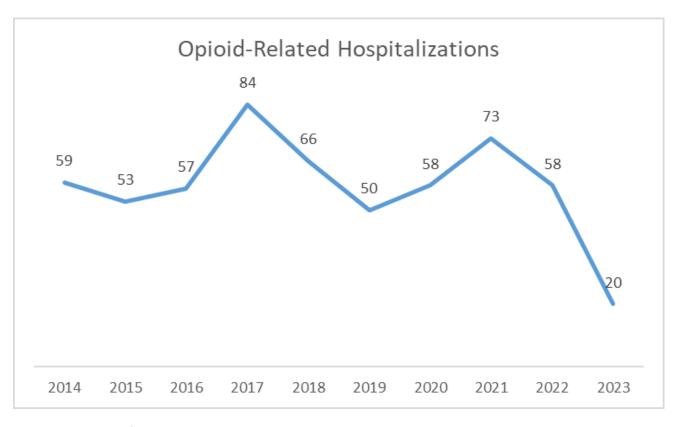
Cocaine and Fentanyl





Note: Cocaine and Fentanyl contributed to the same death 5 times in 2021 and <5 times in 2022 and 2023 (so far)

Hospital Admissions



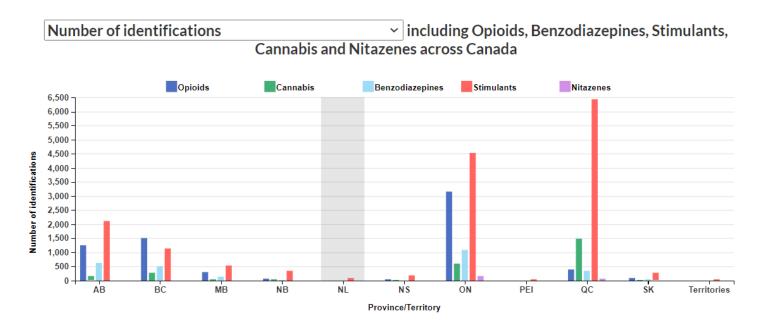
- No strong pattern identified in recent years
- 2023 count will change once all cases are reported in the next calendar year
- Stimulant Hospitalizations will be reported moving forward
- Currently unable to report on Emergency Data (does not use ICD codes or report to National Ambulatory Care Reporting System [NACRS])

Other Drug Toxicity Updates

- Ethanol is often detected in toxicology reports and contribute to a small number of deaths each year in polydrug and acute ethanol toxicity cases
 - Annual acute ETOH tox deaths have been <10 since 2021
 - Deaths due to chronic ETOH misuse have been higher than poisoning deaths (~10) per year since 2021
- Benzodiazepines are increasingly seen and contributing to drug tox deaths in NL and across the country

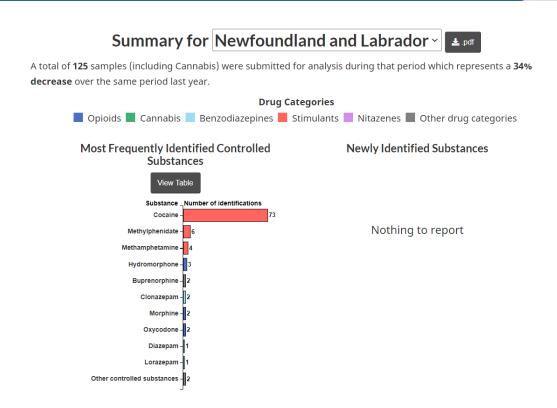
Health Canada Drug Analysis Service Data

Analyzed Drug Report - July to September 2023



- Identify, measure and report on substances seized by authorities nation-wide
- Laboratories in Toronto, Montreal and Vancouver
- Link → https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/drug-analysis-service.html

Health Canada Drug Analysis Service Data



I get monthly raw data which will feed into OCME annual stats report which will soon be posted here → https://www.gov.nl.ca/jps/ (under publications)

Key Messages

- Each year opioids contribute more than stimulants to deaths in NL (males; 30-40)
- Cocaine continues to contribute to deaths at higher rates than fentanyl in NL
- All drug tox deaths will surpass historical data in 2023 (including fentanyl, cocaine, and benzodiazepines)

Goals

- Increased accuracy and reporting capacity at the OCME through a new Analyst, new Information Scientist, and current Public Health Officer (in tandem with new DBMS)
- Working with national colleagues to harmonize death investigation processes across the country
- Continue to work with stakeholders to reduce substancerelated harms in NL

R Training Materials

 Please use this link to access free R Training materials from the Public Health Agency of Canada's Training and Development Unit (TDU)

https://github.com/hc-sc/tdu-intror

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