

Fatal Unintentional and Undetermined Intent Drug Overdose Report

Key Findings About Drug Overdose Decedents, 2019 - January 2024*

- The preliminary data for January 2024 shows that fentanyl- (90.0%) and fentanyl/xylazine- (42.5%) involved deaths are still a major threat and need for concern as seen in previous years.
- The current monthly report is based on confirmed fatal drug overdose cases from 2019 to January 2024. Data from 2023 and 2024 are preliminary and may change due to pending cases. The period of analysis includes January 2019 through December 2023.
- 2023* data overview: As of December, there were 1,331 overdose-related deaths in 2023, with 111 in January, 127 in February, 107 in March, 117 in April, 129 in May, 107 in June, 116 in July, 113 in August, 116 in September, 92 in October, 108 in November and 86 in December. Approximately 83.3% of these deaths (N=1,109) involved fentanyl. Data are subject to change due to pending cases.
- Comparison between 2022-2023*: There were 1,464 confirmed deaths for 2022. Based on annualized data from January-September 2023* (N=1,045), we project a total of 1,393 overdose deaths in calendar year 2023*, representing a projected decrease of 71 deaths (5%) compared to 2022.
- **Demographic data for 2023*:** Males had a higher mortality rate than females in 2023* (59.8 vs. 17.5 per 100,000 population, respectively). In 2023*, the mortality rate was highest for the non-Hispanic Black population and for 45–54-year-olds.
- Place of overdose in 2022 and 2023*: Most of the decedents overdosed at a residence (either their own or someone else's) in 2022 (76.0%) and 2023* (74.2%).
- Fentanyl-involved drug overdose deaths: The average percentage of fentanyl- or fentanyl analog-involved deaths was 85% for 2020, 2021 and 2022. Approximately 83.3% of deaths in 2023 involved fentanyl but this percentage is subject to change because of pending cases.
- **Xylazine, an animal tranquilizer, in drug overdose deaths:** The lethal xylazine/fentanyl combination, first identified in CT in March 2019, continued to be a problem. In preliminary 2023 data, there were 282 deaths (21.2%) involving xylazine and fentanyl. Prior years are as follows: 2020 (N=141;10.2%), 2021 (N=298; 19.8%), and 2022 (N=354, 24.2%).
- New and emerging substances: The Injury and Violence Surveillance Unit (IVSU) from the Department of Public Health (DPH) continues to monitor for other new emerging substances which include, but are not limited to, the designer benzodiazepine family and the Nitazene family of substances (novel synthetic opioids).

Updated on 2-16-2024; Data Source: Connecticut Office of the Chief Medical Examiner (OCME), per CDC Overdose Data to Action for States grant guidelines for SUDORS data.

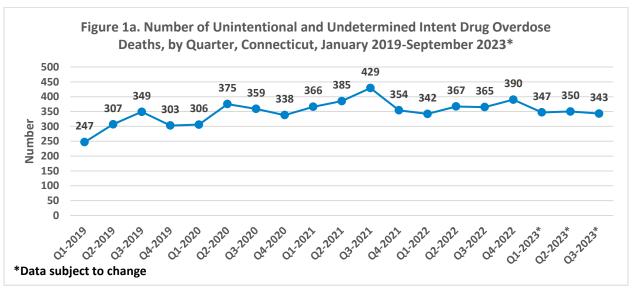
For substance use disorder information visit: https://www.drugfreect.org.

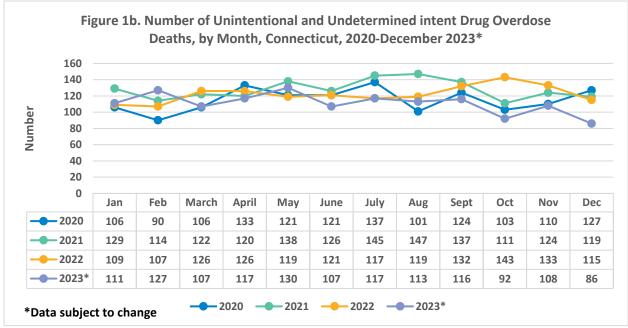
For information on the CT DPH Opioids and Prescription Drug Overdose Prevention Program in the Office of Injury and Violence Prevention, visit: https://www.ct.gov/dph/injuryprevention.

^{*}Data subject to change due to pending cases.



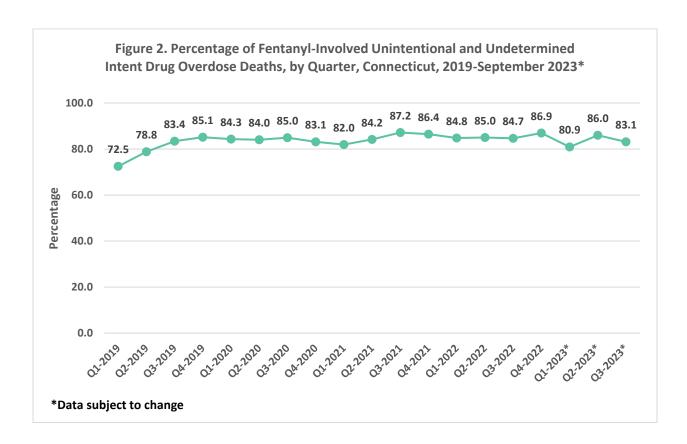
1: Number of Unintentional and Undetermined Intent Drug Overdose Deaths, Connecticut, 2019-December 2023*. There was a 4.3% decrease in drug overdose deaths in 2022 compared to the previous year of 2021. The charts below represent counts of confirmed drug overdose deaths by quarter (Figure 1a) and by month (Figure 1b). Quarterly drug overdose data (Figure 1a) show that for years 2019, 2020 and 2022, Quarter 1 had the lowest number of unintentional and undetermined intent drug overdose deaths within each specific year. Overall, Quarters 2 and 3 were generally the highest each year with the exception of 2022 and 2023*. In 2022, Quarter 4 had the highest number, however those numbers were substantially lower than the number that occurred during Quarter 3 of 2021. Monthly data (Figure 1b) show that July and August of 2021 had the highest number of deaths. In 2022, the month of October had the highest number of deaths. Data for 2023 may change due to the processing of pending cases.





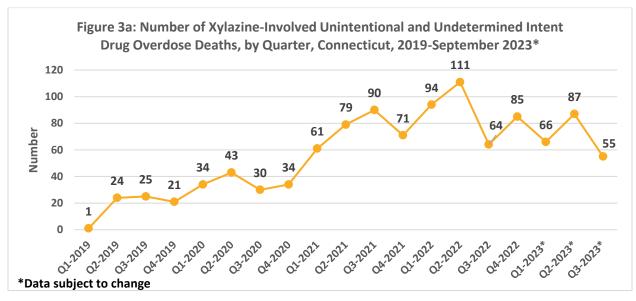


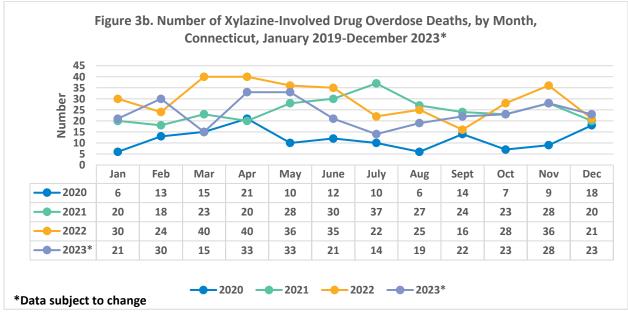
2: Percentage of Fentanyl-Involved Unintentional and Undetermined Intent Drug Overdose Deaths, by Quarter, Connecticut, 2019-September2023*. The average percentage of fentanyl-involved deaths remained high between 2019 and December 2023*. The chart below represents the percentage of fentanyl-involved drug overdose deaths by Quarter (Figure 2). The average percentage of fentanyl- or fentanyl analog-involved deaths was 80% for 2019 and subsequently increased to 85% in 2020, 2021, 2022. In 2023, 83.3% of the deaths involved fentanyl but this data may change due to the processing of pending cases.





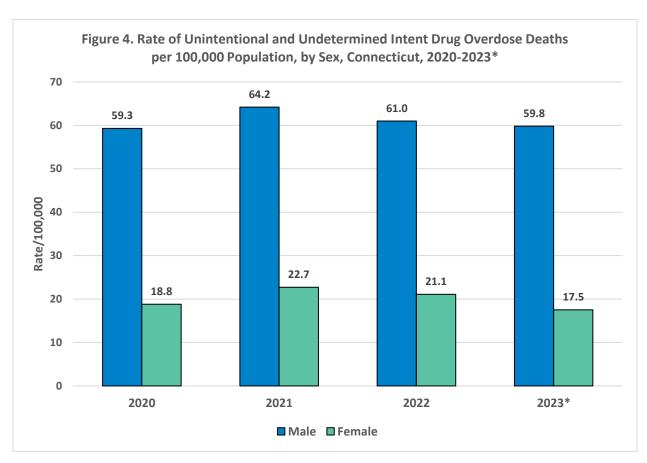
3: Number of Xylazine-Involved Unintentional and Undetermined Intent Drug Overdose Deaths, Connecticut, 2019- December 2023*. To enhance drug effects, recreational drugs are often adulterated with other pharmacological agents such as xylazine, a veterinary sedative not intended for human use. In Connecticut, xylazine first emerged as a novel adulterant in fatal drug overdoses in March 2019. The number of xylazine-involved deaths has increased each year between 2019 and 2023*. The charts below represent the number of xylazine-involved drug overdose deaths by quarter (Figure 3a) and by month (Figure 3b). Quarter 2 of 2022 had the highest number of xylazine-involved death; this number dropped substantially during Quarters 3 and 4. By month (Figure 3b), the highest number of xylazine-involved deaths occurred during March and April of 2022 (N=40). Overall, 2023 shows a lower monthly trend compared to 2022, although 2023 data are subject to change due to pending cases.







4: Drug overdose death rates were higher in males compared to females during 2020 through 2023*. Rates of unintentional and undetermined intent drug overdose-related deaths were consistently higher among males when compared to females. The bar chart below (Figure 4) represents the rates of unintentional and undetermined intent drug overdose death by sex (rate per 100,000 sex-specific population) during 2020 through 2023*.

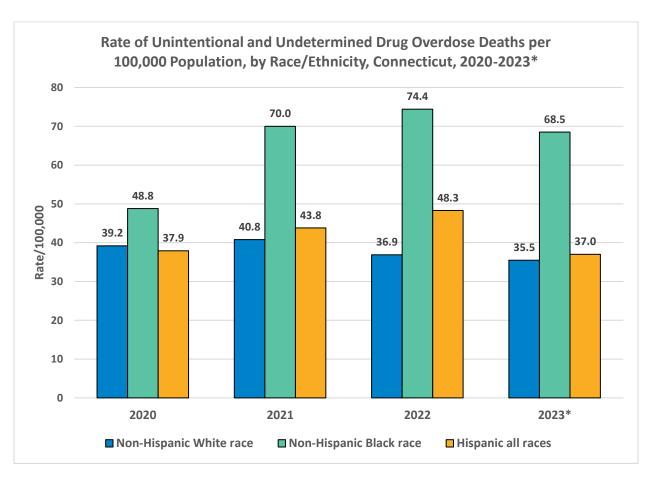


^{*}Annualized data based on January-September 2023 numbers. Data are subject to change.



5: Drug overdose death rates were higher among the non-Hispanic Black and Hispanic populations compared to the non-Hispanic White population.

Between 2021 to 2023*, the drug overdose mortality rate increased substantially in the non-Hispanic Black and Hispanic populations compared to 2020. The chart below represents the unintentional and undetermined intent drug overdose mortality rate (per race/ethnicity specific 100,000 population) in Connecticut, by race/ethnicity for years 2020-2023*.



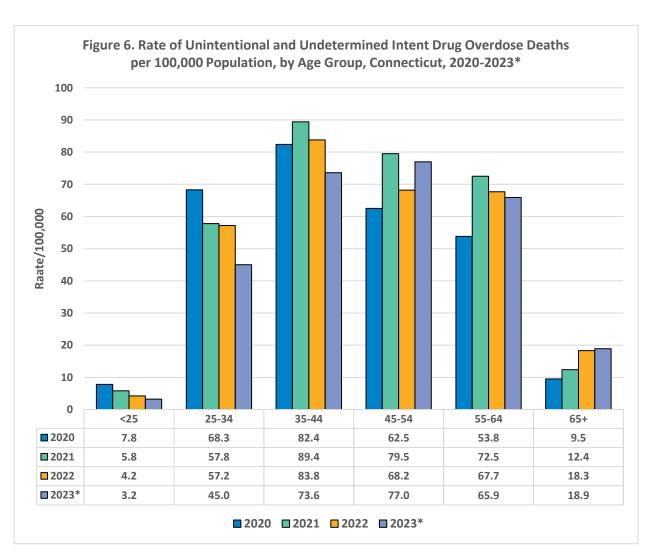
^{*}Annualized data based on January-September numbers of 2023 and data are subject to change.

Note: Hispanic ethnicity includes all races. Counts for the 'Other Non-Hispanic' population, which includes American Indian or Alaska Native, Asian or Pacific Islander, were lower than 20 and therefore the rates were not calculated.



6: Drug overdose death rates were highest in the 35–44-year-old age group in Connecticut, 2020-2023*.

Drug overdose death rates were calculated per 100,000 age-specific population and were highest among the middle-aged, specifically the 35–44, 45–54 and 55–64-year-old age groups in 2020-2023*. There is an increasing trend in drug overdose death rate from 2020 through 2023* for the 65+ year-old age group. The chart below represents the unintentional and undetermined intent drug overdose mortality rate in Connecticut, by age group, by year for 2020-2023*.

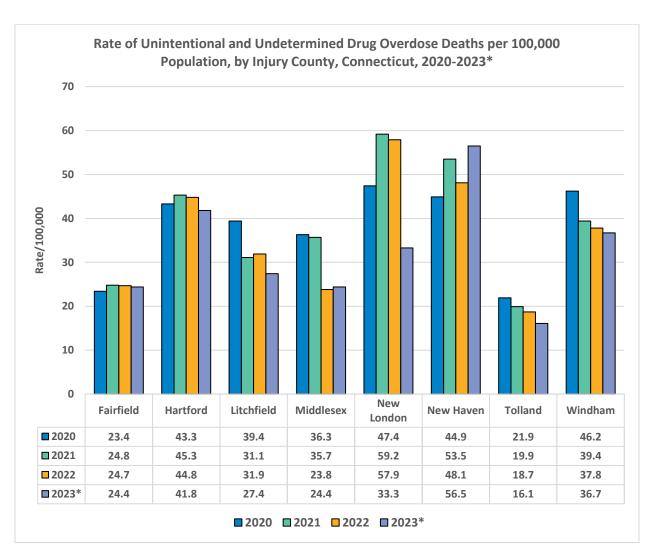


^{*}Annualized data based on January-September 2023 numbers. Data are subject to change.



7: Drug overdose death rates in Connecticut, by County of Injury, 2020-2023*

The chart below represents the unintentional and undetermined intent drug overdose mortality rate in Connecticut, by injury county, for 2020-2023*. Year 2023 data is annualized based on January-September numbers and these data suggest that across all counties in the state, there is a decrease in the drug overdose death rate in 2023 compared to 2022, with the exception of Middlesex County and New Haven County.



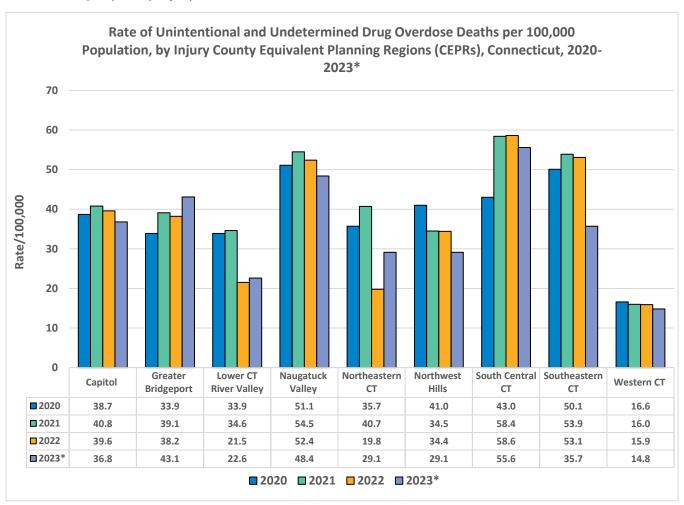
^{*}Annualized data based on January-September 2023 numbers. Data are subject to change.



8: Drug overdose death rates in Connecticut, by injury County Equivalent Planning Regions (CEPRs), 2020-2023*: In 2017, Connecticut requested the US Census Bureau to adopt the State's nine planning regions as county-equivalent geographic units for the purposes of collecting, tabulating, and disseminating statistical data, replacing the State's eight counties. Although the planning regions and counties do not align, there is substantial overlap. The nine CEPRs are: Capitol Planning region, Greater Bridgeport, Lower Connecticut Valley, Naugatuck Valley, Northeastern Connecticut, Northwest Hills, South Central Connecticut, and Western Connecticut.

The Census Bureau proposes to implement this change internally in early 2022. By 2024, all internal and external Census Bureau operations and publications will use the nine new planning region boundaries, names, and codes, except for 2020 decennial census data publications and other datasets referencing the eight legacy counties published before June 1, 2022.

The below chart shows the rate of unintentional and undetermined drug overdose deaths per 100,000 people, by injury CEPRs, from 2020-2023*.





As shown in the above chart, the South Central Connecticut planning region (which includes major cities/towns such as New Haven, West Haven, and Meriden) had the highest drug overdose death rate followed by the Naugatuck Valley planning region (which includes major cities/towns such as Waterbury and Bristol). The lowest drug overdose death rates were seen in the Western Connecticut planning region (which includes major cities/towns such as Danbury, Norwalk, and Stamford) and the Lower Connecticut River Valley planning region (which includes the major city/town of Middletown). Year 2023 data are annualized based on January-September numbers and subject to change because of pending cases. Please see the following website for more information on the CEPRs: https://www.federalregister.gov/documents/2022/06/06/2022-12063/change-to-county-equivalents-in-the-state-of-connecticut

Last updated 2/13/2024
Injury and Violence Surveillance Unit
Community, Health, and Prevention Branch