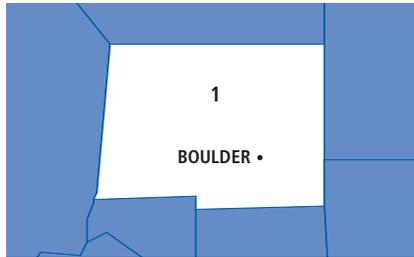


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## ABBREVIATED PROFILES FOR AREAS WITH FEW CASES

## Boulder, CO

ERRATA



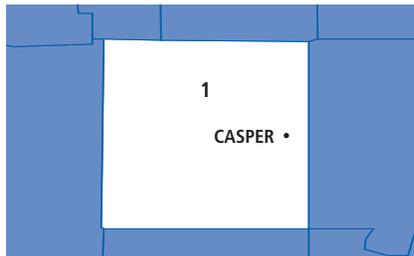
Metro area population, 2000 291,288  
 Percent of population covered by DAWN 100%

### Metro area overview: Deaths and population by county, 2000\*

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Boulder County	—	—	—	—	291,288
<b>Total, participating (1)</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>291,288</b>

\*Errors were identified in the data for 2000, so these have been removed.

## Casper, WY

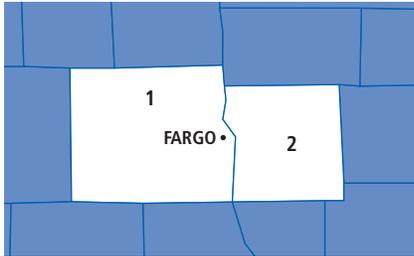


Metro area population, 2000 66,533  
 Percent of population covered by DAWN 100%

### Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Natrona County	7	1	6	114	66,533
<b>Total, participating (1)</b>	<b>7</b>	<b>1</b>	<b>6</b>	<b>114</b>	<b>66,533</b>

# Fargo, ND



Metro area population, 2000 174,367  
 Percent of population covered by DAWN 100%

## Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
<b>North Dakota jurisdiction</b>					
1. Cass County	1	1	—	102	123,138
<b>Minnesota jurisdiction</b>					
2. Clay County	—	—	—	219	51,229
<b>Total, participating (2)</b>	<b>1</b>	<b>1</b>	<b>—</b>	<b>321</b>	<b>174,367</b>

# Indianapolis, IN



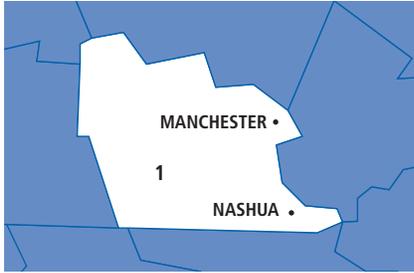
Metro area population, 2000 1,607,486  
 Percent of population covered by DAWN 61%

## Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Boone County					46,107
2. Hamilton County					182,740
3. Hancock County					55,391
4. Hendricks County					104,093
5. Johnson County	2	2	—	60	115,209
6. Madison County					133,358
7. Marion County	9	9	—	1,148	860,454
8. Morgan County					66,689
9. Shelby County					43,445
<b>Total, participating (2)</b>	<b>11</b>	<b>11</b>	<b>—</b>	<b>1,208</b>	<b>975,663</b>

Areas that are shaded did not participate in DAWN in 2000.

# Manchester-Nashua, NH

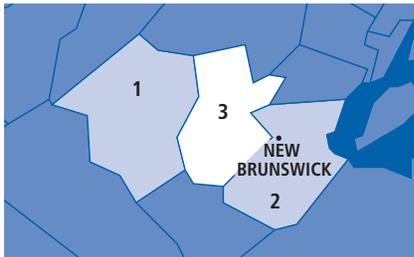


Metro area population, 2000 380,841  
 Percent of population covered by DAWN 100%

## Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Hillsborough County	13	11	2	361	380,841
<b>Total, participating (1)</b>	<b>13</b>	<b>11</b>	<b>2</b>	<b>361</b>	<b>380,841</b>

# Middlesex-Somerset, NJ



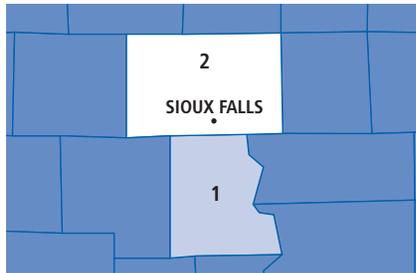
Metro area population, 2000 1,169,641  
 Percent of population covered by DAWN 25%

## Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Hunterdon County					121,989
2. Middlesex County					750,162
3. Somerset County	14	7	7	418	297,490
<b>Total, participating (1)</b>	<b>14</b>	<b>7</b>	<b>7</b>	<b>418</b>	<b>297,490</b>

Areas that are shaded did not participate in DAWN in 2000.

# Sioux Falls, SD



Metro area population, 2000 172,412  
 Percent of population covered by DAWN 86%

## Metro area overview: Deaths and population by county, 2000

Metro area component	Deaths involving drug abuse			Total deaths certified	Total population (2000)
	TOTAL	Drug-induced	Drug-related		
1. Lincoln County					24,131
2. Minnehaha County	1	1	—	409	148,281
<b>Total, participating (1)</b>	<b>1</b>	<b>1</b>	<b>—</b>	<b>409</b>	<b>148,281</b>

Areas that are shaded did not participate in DAWN in 2000.



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## AREA SPOTLIGHTS

# Atlanta: Fulton County, GA



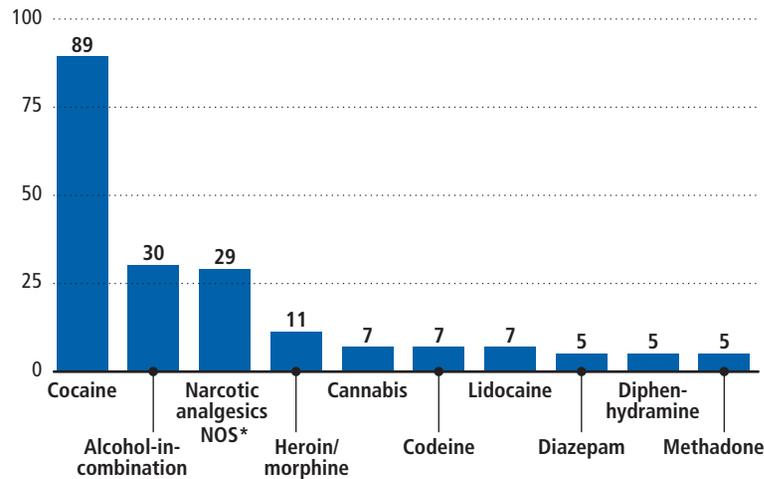
## Fulton County, GA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	114
Drug-induced	54
Drug-related	60
<b>Total deaths certified</b> 1,345	
<b>Population (2000)</b> 816,006	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	26%	27%	24%	—	8%	30%	26%	31%
<b>Number of drugs involved</b>								
Single-drug	38%	42%	24%	—	46%	22%	45%	40%
Multi-drug	62%	58%	76%	100%	54%	78%	55%	60%
<b>Cause of death</b>								
Drug-induced	47%	42%	62%	50%	69%	61%	45%	36%
Drug-related	53%	58%	38%	50%	31%	39%	55%	64%
<b>Manner of death</b>								
Suicide	16%	13%	24%	50%	31%	17%	16%	9%
Accidental/unexpected	61%	61%	62%	50%	69%	74%	71%	47%
All others	23%	26%	14%	—	—	9%	13%	44%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	41	18	49	33	30	—
Cocaine	76	41	103	121	89	37
Heroin/morphine	14	19	26	25	11	—
Marijuana	9	4	8	8	7	1
Amphetamines	—	—	—	3	2	—
Methamphetamine	—	—	—	1	1	—
Club drugs <sup>1</sup>	1	1	—	2	—	—
Hallucinogens <sup>2</sup>	—	—	1	—	—	—
Inhalants	—	—	—	4	1	—
Narcotic analgesics <sup>3</sup>	11	11	16	23	51	2
Other analgesics	3	1	5	2	2	—
Benzodiazepines	5	3	9	13	12	—
Antidepressants	8	8	10	7	7	1
All other substances <sup>3</sup>	21	17	20	20	24	2
<b>Total drug deaths</b>	<b>98</b>	<b>58</b>	<b>125</b>	<b>158</b>	<b>114</b>	<b>43</b>
<b>Total drug mentions</b>	<b>189</b>	<b>123</b>	<b>247</b>	<b>262</b>	<b>237</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,497</b>	<b>1,377</b>	<b>1,496</b>	<b>1,397</b>	<b>1,345</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Baltimore: Baltimore City, MD



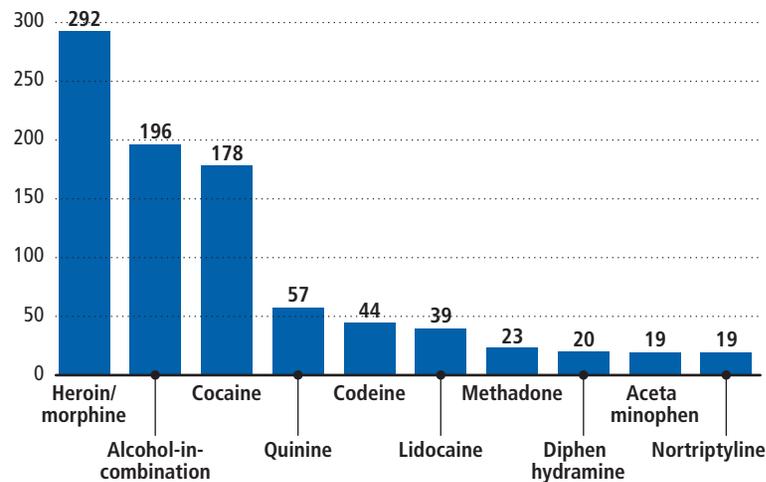
## Baltimore City, MD: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	360
Drug-induced	306
Drug-related	54
<b>Total deaths certified</b> 3,507	
<b>Population (2000)</b> 651,154	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	54%	56%	49%	—	43%	53%	58%	53%
<b>Number of drugs involved</b>								
Single-drug	10%	9%	13%	—	14%	8%	8%	13%
Multi-drug	90%	91%	88%	100%	86%	92%	92%	87%
<b>Cause of death</b>								
Drug-induced	85%	85%	85%	100%	71%	85%	88%	82%
Drug-related	15%	15%	15%	—	29%	15%	12%	18%
<b>Manner of death</b>								
Suicide	4%	2%	13%	33%	14%	2%	2%	8%
Accidental/unexpected	1%	1%	3%	—	—	3%	2%	—
All others	94%	97%	85%	67%	86%	95%	97%	92%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	128	186	181	174	196	—
Cocaine	208	228	241	232	178	12
Heroin/morphine	246	278	310	344	292	21
Marijuana	—	—	—	—	—	—
Amphetamines	1	—	—	—	—	—
Methamphetamine	—	—	—	13	—	—
Club drugs <sup>1</sup>	3	—	2	2	1	—
Hallucinogens <sup>2</sup>	3	—	—	—	1	—
Inhalants	—	—	—	2	—	—
Narcotic analgesics <sup>3</sup>	86	100	118	71	86	1
Other analgesics	19	28	22	29	25	1
Benzodiazepines	19	18	25	6	16	1
Antidepressants	47	66	80	85	73	—
All other substances <sup>3</sup>	316	353	393	305	226	—
<b>Total drug deaths</b>	<b>318</b>	<b>357</b>	<b>379</b>	<b>404</b>	<b>360</b>	<b>36</b>
<b>Total drug mentions</b>	<b>1,076</b>	<b>1,257</b>	<b>1,372</b>	<b>1,263</b>	<b>1,094</b>	<b>—</b>
<b>Total deaths certified</b>	<b>3,588</b>	<b>3,464</b>	<b>3,488</b>	<b>3,687</b>	<b>3,507</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Boston: Middlesex County, MA



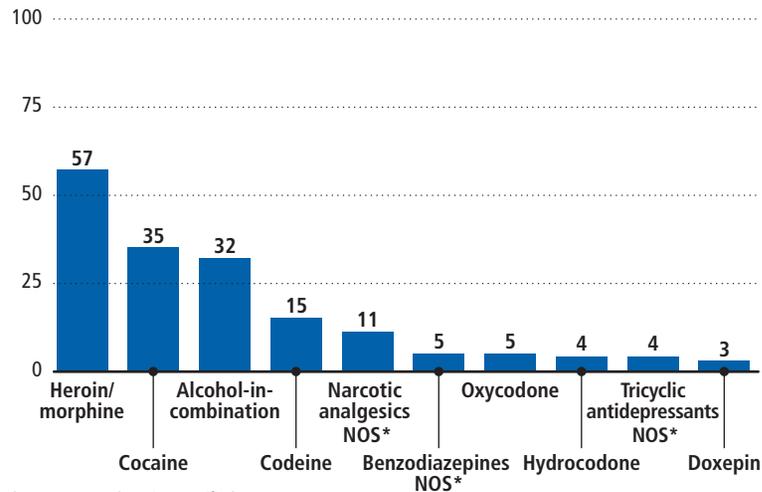
## Middlesex County, MA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	104
Drug-induced	94
Drug-related	10
<b>Total deaths certified</b>	
	580
<b>Population (2000)</b>	
	1,465,396

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	31%	34%	22%	—	13%	29%	33%	33%
<b>Number of drugs involved</b>								
Single-drug	33%	34%	30%	—	50%	24%	25%	48%
Multi-drug	67%	66%	70%	—	50%	76%	75%	52%
<b>Cause of death</b>								
Drug-induced	90%	88%	96%	—	88%	95%	88%	93%
Drug-related	10%	12%	4%	—	13%	5%	13%	7%
<b>Manner of death</b>								
Suicide	13%	6%	33%	—	13%	5%	6%	33%
Accidental/unexpected	3%	4%	—	—	13%	—	4%	—
All others	84%	90%	67%	—	75%	95%	90%	67%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	28	45	31	32	—
Cocaine	40	28	40	32	35	6
Heroin/morphine	50	47	62	46	57	15
Marijuana	—	—	1	—	1	—
Amphetamines	—	1	—	—	—	—
Methamphetamine	—	1	—	4	—	—
Club drugs <sup>1</sup>	—	—	—	—	1	1
Hallucinogens <sup>2</sup>	—	—	—	—	1	1
Inhalants	1	1	1	2	—	—
Narcotic analgesics <sup>3</sup>	44	24	43	24	38	6
Other analgesics	8	10	11	5	2	—
Benzodiazepines	6	7	22	4	8	—
Antidepressants	18	16	36	23	11	2
All other substances <sup>3</sup>	18	27	24	13	11	3
<b>Total drug deaths</b>	<b>79</b>	<b>81</b>	<b>120</b>	<b>104</b>	<b>104</b>	<b>34</b>
<b>Total drug mentions</b>	<b>216</b>	<b>190</b>	<b>285</b>	<b>184</b>	<b>197</b>	<b>—</b>
<b>Total deaths certified</b>	<b>640</b>	<b>610</b>	<b>637</b>	<b>646</b>	<b>580</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Boston: Suffolk County, MA



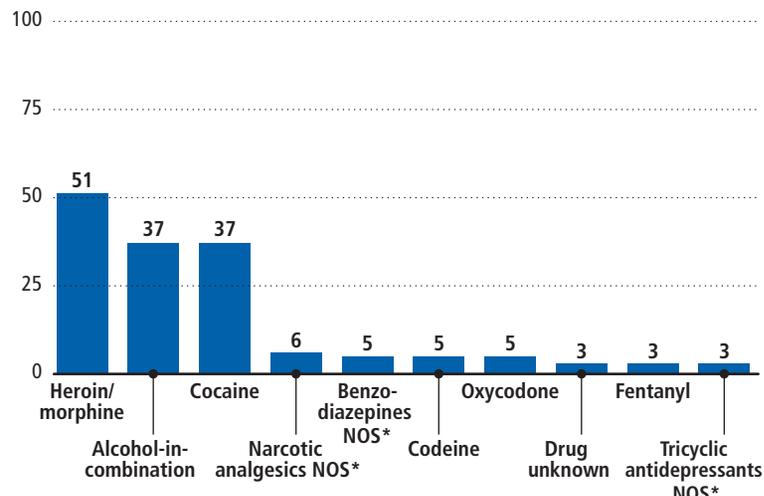
## Suffolk County, MA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	94
Drug-induced	86
Drug-related	8
<b>Total deaths certified</b>	
	753
<b>Population (2000)</b>	
	689,807

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	39%	41%	33%	—	14%	36%	52%	34%
<b>Number of drugs involved</b>								
Single-drug	34%	39%	21%	—	14%	44%	27%	38%
Multi-drug	66%	61%	79%	—	86%	56%	73%	62%
<b>Cause of death</b>								
Drug-induced	91%	93%	88%	—	100%	92%	94%	86%
Drug-related	9%	7%	13%	—	—	8%	6%	14%
<b>Manner of death</b>								
Suicide	15%	6%	42%	—	—	12%	15%	21%
Accidental/unexpected	1%	1%	—	—	—	—	—	3%
All others	84%	93%	58%	—	100%	88%	85%	76%

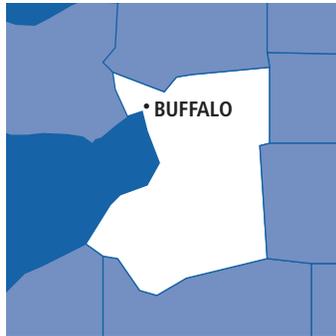
## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	33	25	25	33	37	—
Cocaine	37	33	31	31	37	10
Heroin/morphine	37	37	40	48	51	14
Marijuana	—	—	—	—	1	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	5	—	—
Club drugs <sup>1</sup>	—	—	—	—	—	—
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	1	2	2	2	—	—
Narcotic analgesics <sup>3</sup>	37	23	23	21	23	3
Other analgesics	9	9	2	4	4	3
Benzodiazepines	8	6	8	5	7	—
Antidepressants	9	14	14	16	11	2
All other substances <sup>3</sup>	21	17	17	2	7	—
<b>Total drug deaths</b>	<b>71</b>	<b>74</b>	<b>82</b>	<b>100</b>	<b>94</b>	<b>32</b>
<b>Total drug mentions</b>	<b>192</b>	<b>166</b>	<b>162</b>	<b>167</b>	<b>178</b>	<b>—</b>
<b>Total deaths certified</b>	<b>747</b>	<b>750</b>	<b>766</b>	<b>771</b>	<b>753</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Buffalo: Erie County, NY



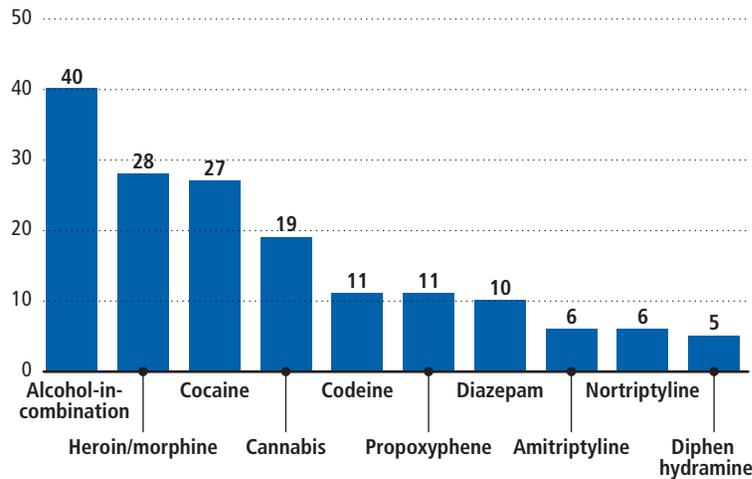
## Erie County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	83
Drug-induced	37
Drug-related	46
<b>Total deaths certified</b> 943	
<b>Population (2000)</b> 950,265	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	48%	48%	53%	100%	71%	20%	56%	48%
<b>Number of drugs involved</b>								
Single-drug	20%	19%	27%	—	—	47%	7%	24%
Multi-drug	80%	81%	73%	100%	100%	53%	93%	76%
<b>Cause of death</b>								
Drug-induced	45%	42%	60%	—	57%	53%	56%	30%
Drug-related	55%	58%	40%	100%	43%	47%	44%	70%
<b>Manner of death</b>								
Suicide	14%	15%	13%	—	29%	7%	15%	15%
Accidental/unexpected	10%	10%	—	100%	—	20%	7%	6%
All others	76%	75%	87%	—	71%	73%	78%	79%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	35	34	33	40	—
Cocaine	38	31	27	36	27	5
Heroin/morphine	37	42	23	37	28	5
Marijuana	8	13	17	12	19	4
Amphetamines	—	—	—	1	—	—
Methamphetamine	—	—	1	1	—	—
Club drugs <sup>1</sup>	—	—	1	1	2	—
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	1	3	—	—	—
Narcotic analgesics <sup>3</sup>	43	51	31	26	39	3
Other analgesics	15	15	3	8	—	—
Benzodiazepines	28	25	13	18	15	—
Antidepressants	23	55	29	36	29	—
All other substances <sup>3</sup>	60	89	42	37	30	—
<b>Total drug deaths</b>	<b>115</b>	<b>128</b>	<b>82</b>	<b>100</b>	<b>83</b>	<b>17</b>
<b>Total drug mentions</b>	<b>283</b>	<b>357</b>	<b>224</b>	<b>246</b>	<b>229</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,041</b>	<b>972</b>	<b>938</b>	<b>987</b>	<b>943</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Chicago: Cook County, IL



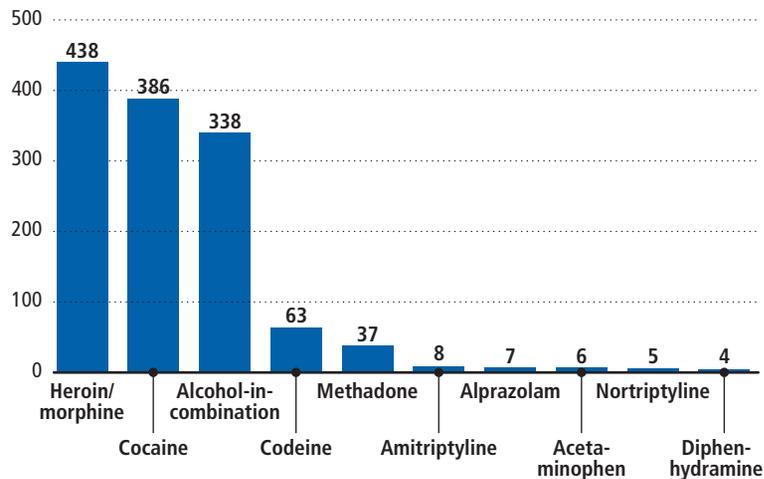
## Cook County, IL: Deaths and population, 2000

Deaths involving drug abuse	
Total	703
Drug-induced	494
Drug-related	209
<b>Total deaths certified</b> 5,301	
<b>Population (2000)</b> 5,376,741	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

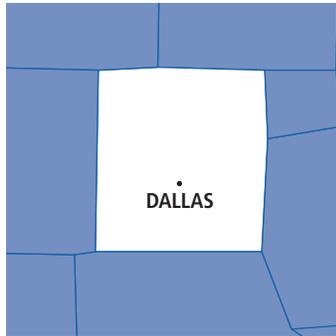
	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	48%	52%	35%	—	44%	52%	49%	47%
<b>Number of drugs involved</b>								
Single-drug	33%	31%	38%	100%	34%	33%	31%	35%
Multi-drug	67%	69%	62%	—	66%	67%	69%	65%
<b>Cause of death</b>								
Drug-induced	70%	71%	67%	100%	78%	73%	70%	66%
Drug-related	30%	29%	33%	—	22%	27%	30%	34%
<b>Manner of death</b>								
Suicide	8%	7%	11%	—	10%	6%	7%	9%
Accidental/unexpected	90%	91%	84%	100%	88%	93%	90%	87%
All others	3%	2%	4%	—	2%	1%	2%	4%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	208	268	321	329	338	—
Cocaine	286	350	409	460	386	105
Heroin/morphine	211	334	375	412	438	98
Marijuana	3	2	—	—	—	—
Amphetamines	—	1	—	—	1	—
Methamphetamine	1	—	—	—	1	—
Club drugs <sup>1</sup>	—	—	—	—	3	—
Hallucinogens <sup>2</sup>	3	6	3	1	4	—
Inhalants	1	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	108	116	125	124	107	17
Other analgesics	23	17	13	14	7	—
Benzodiazepines	16	22	7	8	10	—
Antidepressants	39	52	27	24	30	6
All other substances <sup>3</sup>	43	46	17	45	26	5
<b>Total drug deaths</b>	<b>472</b>	<b>613</b>	<b>672</b>	<b>751</b>	<b>703</b>	<b>231</b>
<b>Total drug mentions</b>	<b>942</b>	<b>1,214</b>	<b>1,297</b>	<b>1,417</b>	<b>1,351</b>	<b>—</b>
<b>Total deaths certified</b>	<b>5,547</b>	<b>5,262</b>	<b>5,439</b>	<b>5,481</b>	<b>5,301</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Dallas: Dallas County, TX



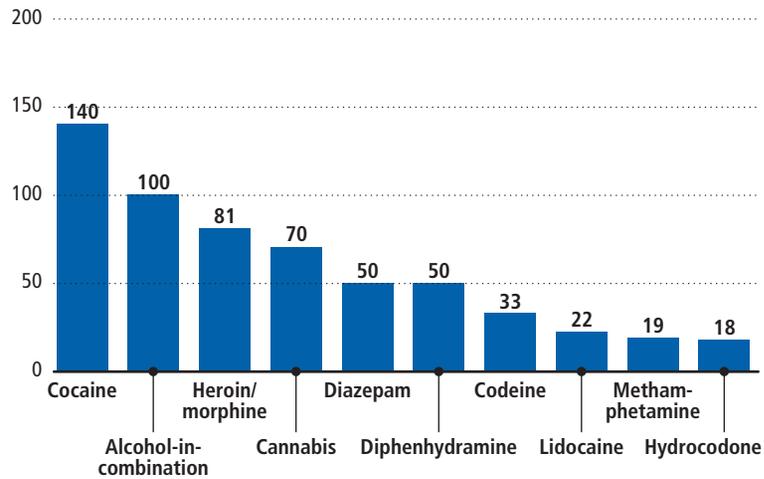
## Dallas County, TX: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	271
Drug-induced	138
Drug-related	133
<b>Total deaths certified</b> 3,283	
<b>Population (2000)</b> 2,218,899	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	37%	39%	32%	50%	26%	47%	37%	34%
<b>Number of drugs involved</b>								
Single-drug	18%	19%	13%	50%	12%	20%	16%	19%
Multi-drug	82%	81%	87%	50%	88%	80%	84%	81%
<b>Cause of death</b>								
Drug-induced	51%	46%	67%	50%	59%	45%	55%	47%
Drug-related	49%	54%	33%	50%	41%	55%	45%	53%
<b>Manner of death</b>								
Suicide	15%	17%	10%	25%	21%	29%	8%	13%
Accidental/unexpected	61%	61%	58%	50%	71%	57%	71%	49%
All others	24%	21%	32%	25%	9%	14%	22%	38%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	179	174	133	119	100	—
Cocaine	121	126	130	132	140	26
Heroin/morphine	59	62	62	68	81	4
Marijuana	109	98	85	84	70	11
Amphetamines	9	10	5	3	6	—
Methamphetamine	13	17	7	7	19	2
Club drugs <sup>1</sup>	2	4	2	1	6	2
Hallucinogens <sup>2</sup>	2	—	—	4	7	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	31	49	42	46	83	1
Other analgesics	25	34	34	34	25	—
Benzodiazepines	70	52	41	45	63	—
Antidepressants	59	73	63	68	61	—
All other substances <sup>3</sup>	149	186	156	117	167	2
<b>Total drug deaths</b>	<b>318</b>	<b>329</b>	<b>316</b>	<b>273</b>	<b>271</b>	<b>48</b>
<b>Total drug mentions</b>	<b>828</b>	<b>885</b>	<b>760</b>	<b>728</b>	<b>828</b>	<b>—</b>
<b>Total deaths certified</b>	<b>3,068</b>	<b>2,988</b>	<b>3,079</b>	<b>2,997</b>	<b>3,283</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Denver: Denver County, CO



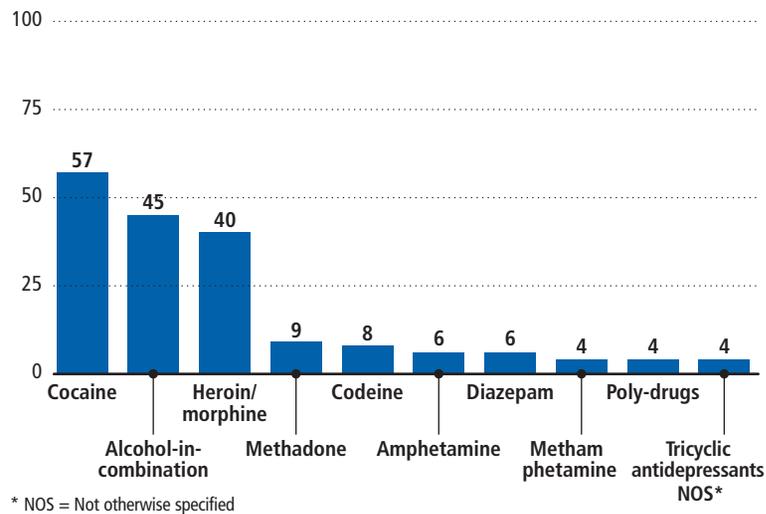
## Denver County, CO: Deaths and population, 2000

Deaths involving drug abuse	
Total	123
Drug-induced	95
Drug-related	28
<b>Total deaths certified</b> 2,943	
<b>Population (2000)</b> 554,636	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	37%	38%	30%	50%	14%	48%	28%	41%
<b>Number of drugs involved</b>								
Single-drug	39%	41%	30%	50%	57%	36%	35%	41%
Multi-drug	61%	59%	70%	50%	43%	64%	65%	59%
<b>Cause of death</b>								
Drug-induced	77%	77%	81%	50%	71%	92%	79%	70%
Drug-related	23%	23%	19%	50%	29%	8%	21%	30%
<b>Manner of death</b>								
Suicide	12%	12%	15%	50%	14%	8%	9%	15%
Accidental/unexpected	72%	72%	74%	—	86%	88%	70%	67%
All others	15%	16%	11%	50%	—	4%	21%	17%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	32	36	42	52	45	—
Cocaine	41	40	45	56	57	20
Heroin/morphine	23	42	35	63	40	14
Marijuana	—	—	—	—	—	—
Amphetamines	—	1	1	3	6	—
Methamphetamine	—	1	1	5	4	—
Club drugs <sup>1</sup>	—	—	—	—	1	1
Hallucinogens <sup>2</sup>	—	—	—	—	1	1
Inhalants	—	—	1	—	—	—
Narcotic analgesics <sup>3</sup>	15	20	8	28	29	6
Other analgesics	2	2	3	2	5	1
Benzodiazepines	4	2	2	16	14	—
Antidepressants	6	14	14	15	14	3
All other substances <sup>3</sup>	11	4	11	12	23	2
<b>Total drug deaths</b>	<b>72</b>	<b>84</b>	<b>84</b>	<b>135</b>	<b>123</b>	<b>48</b>
<b>Total drug mentions</b>	<b>134</b>	<b>162</b>	<b>163</b>	<b>252</b>	<b>239</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,721</b>	<b>2,885</b>	<b>2,879</b>	<b>2,940</b>	<b>2,943</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Detroit: Wayne County, MI



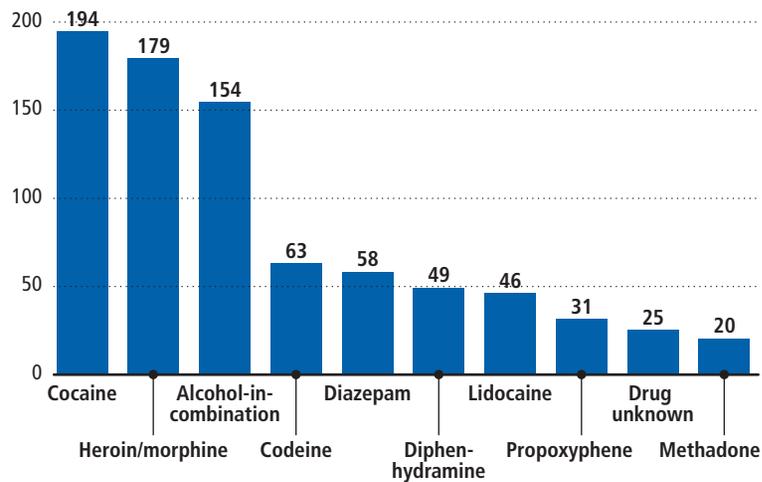
## Wayne County, MI: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	402
Drug-induced	211
Drug-related	191
<b>Total deaths certified</b> 3,327	
<b>Population (2000)</b> 2,061,162	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	38%	41%	32%	—	64%	47%	39%	35%
<b>Number of drugs involved</b>								
Single-drug	18%	17%	18%	33%	—	14%	14%	22%
Multi-drug	82%	83%	82%	67%	100%	86%	86%	78%
<b>Cause of death</b>								
Drug-induced	52%	54%	49%	33%	36%	59%	66%	43%
Drug-related	48%	46%	51%	67%	64%	41%	34%	57%
<b>Manner of death</b>								
Suicide	4%	4%	5%	—	9%	8%	3%	4%
Accidental/unexpected	60%	63%	53%	33%	45%	78%	76%	45%
All others	36%	33%	42%	67%	45%	14%	21%	51%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	107	92	111	122	154	—
Cocaine	172	174	186	169	194	31
Heroin/morphine	104	145	148	127	179	27
Marijuana	—	—	—	—	—	—
Amphetamines	1	—	—	—	1	—
Methamphetamine	—	—	—	—	—	—
Club drugs <sup>1</sup>	1	—	1	1	2	—
Hallucinogens <sup>2</sup>	—	—	1	—	—	—
Inhalants	2	3	—	1	—	—
Narcotic analgesics <sup>3</sup>	111	127	150	169	152	4
Other analgesics	4	11	9	13	17	—
Benzodiazepines	48	77	81	73	88	1
Antidepressants	70	69	103	95	86	1
All other substances <sup>3</sup>	172	304	294	363	299	7
<b>Total drug deaths</b>	<b>319</b>	<b>364</b>	<b>412</b>	<b>412</b>	<b>402</b>	<b>71</b>
<b>Total drug mentions</b>	<b>792</b>	<b>1,002</b>	<b>1,084</b>	<b>1,133</b>	<b>1,172</b>	<b>—</b>
<b>Total deaths certified</b>	<b>3,090</b>	<b>3,046</b>	<b>2,928</b>	<b>3,316</b>	<b>3,327</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Long Island: Nassau County, NY



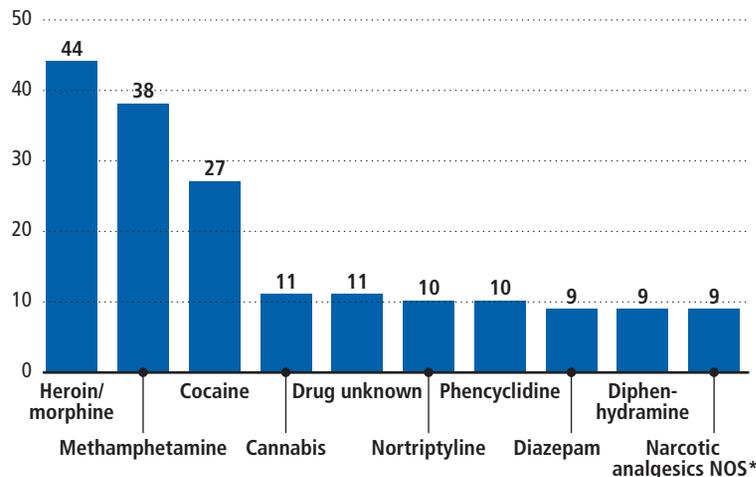
## Nassau County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	102
Drug-induced	60
Drug-related	42
<b>Total deaths certified</b> 4,817	
<b>Population (2000)</b> 1,334,544	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	6%	6%	5%	—	—	25%	3%	—
<b>Number of drugs involved</b>								
Single-drug	33%	37%	19%	67%	57%	20%	20%	40%
Multi-drug	67%	63%	81%	33%	43%	80%	80%	60%
<b>Cause of death</b>								
Drug-induced	59%	54%	76%	—	43%	70%	63%	60%
Drug-related	41%	46%	24%	100%	57%	30%	37%	40%
<b>Manner of death</b>								
Suicide	15%	6%	48%	—	21%	10%	10%	20%
Accidental/unexpected	65%	69%	48%	100%	79%	75%	63%	51%
All others	21%	25%	5%	—	—	15%	27%	29%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	26	22	—	7	6	—
Cocaine	53	37	39	54	27	1
Heroin/morphine	31	32	35	38	44	7
Marijuana	50	53	4	18	11	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	42	38	3
Club drugs <sup>1</sup>	1	1	2	—	1	1
Hallucinogens <sup>2</sup>	1	—	1	8	10	—
Inhalants	—	2	3	1	1	—
Narcotic analgesics <sup>3</sup>	36	20	13	27	20	1
Other analgesics	17	7	6	10	14	2
Benzodiazepines	39	9	10	11	10	—
Antidepressants	39	12	22	31	33	2
All other substances <sup>3</sup>	56	38	35	28	44	17
<b>Total drug deaths</b>	<b>132</b>	<b>108</b>	<b>85</b>	<b>103</b>	<b>102</b>	<b>34</b>
<b>Total drug mentions</b>	<b>349</b>	<b>233</b>	<b>170</b>	<b>275</b>	<b>259</b>	<b>—</b>
<b>Total deaths certified</b>	<b>5,027</b>	<b>5,007</b>	<b>4,675</b>	<b>4,628</b>	<b>4,817</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Long Island: Suffolk County, NY



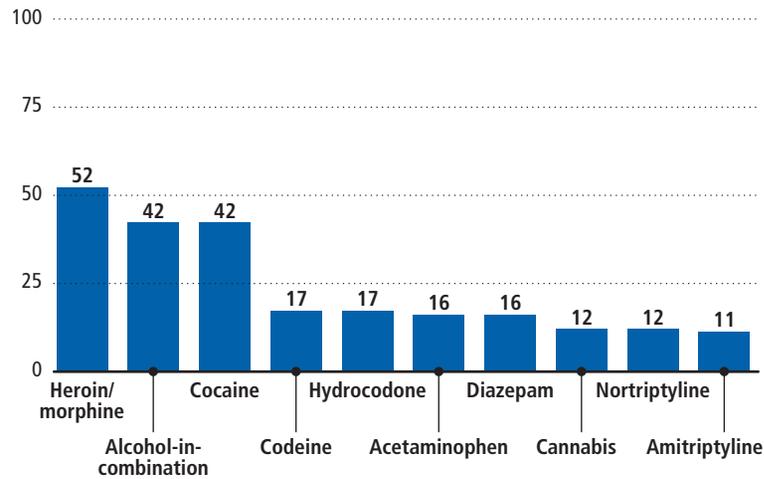
## Suffolk County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	107
Drug-induced	94
Drug-related	13
<b>Total deaths certified</b> 4,402	
<b>Population (2000)</b> 1,419,369	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	39%	42%	22%	—	40%	45%	39%	36%
<b>Number of drugs involved</b>								
Single-drug	7%	4%	9%	—	20%	—	8%	7%
Multi-drug	93%	96%	91%	—	80%	100%	92%	93%
<b>Cause of death</b>								
Drug-induced	88%	86%	91%	—	100%	91%	86%	86%
Drug-related	12%	14%	9%	—	—	9%	14%	14%
<b>Manner of death</b>								
Suicide	15%	9%	35%	—	—	—	11%	27%
Accidental/unexpected	79%	86%	61%	—	80%	95%	83%	68%
All others	6%	6%	4%	—	20%	5%	6%	5%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	19	22	34	36	42	—
Cocaine	37	19	38	40	42	3
Heroin/morphine	33	36	37	67	52	3
Marijuana	13	14	19	25	12	—
Amphetamines	—	—	2	—	—	—
Methamphetamine	—	—	2	—	—	—
Club drugs <sup>1</sup>	—	—	—	1	2	—
Hallucinogens <sup>2</sup>	—	—	1	1	—	—
Inhalants	2	1	2	—	2	—
Narcotic analgesics <sup>3</sup>	13	20	29	42	53	1
Other analgesics	9	13	19	21	22	—
Benzodiazepines	19	20	23	25	21	—
Antidepressants	24	7	31	46	63	—
All other substances <sup>3</sup>	35	32	73	74	64	—
<b>Total drug deaths</b>	<b>73</b>	<b>62</b>	<b>88</b>	<b>112</b>	<b>107</b>	<b>7</b>
<b>Total drug mentions</b>	<b>204</b>	<b>184</b>	<b>310</b>	<b>378</b>	<b>375</b>	<b>—</b>
<b>Total deaths certified</b>	<b>4,342</b>	<b>4,154</b>	<b>4,275</b>	<b>4,256</b>	<b>4,402</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Milwaukee: Milwaukee County, WI



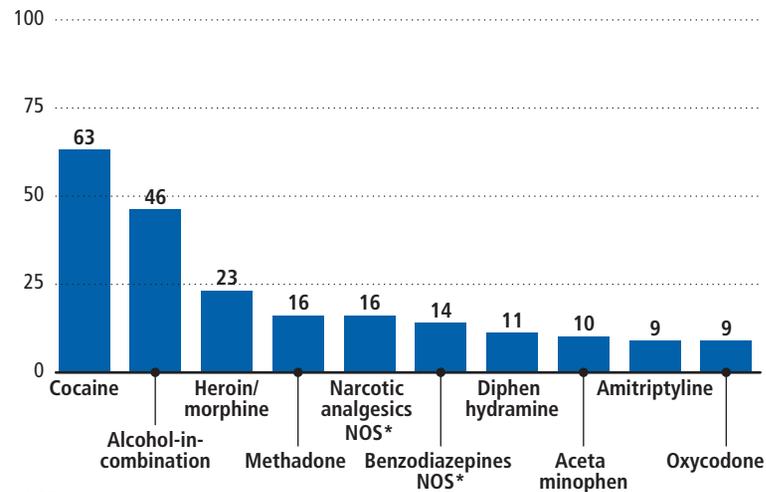
## Milwaukee County, WI: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	110
Drug-induced	89
Drug-related	21
<b>Total deaths certified</b>	
	1,936
<b>Population (2000)</b>	
	940,164

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	42%	46%	31%	—	—	39%	39%	46%
<b>Number of drugs involved</b>								
Single-drug	16%	21%	6%	—	—	11%	18%	17%
Multi-drug	84%	79%	94%	—	—	89%	82%	83%
<b>Cause of death</b>								
Drug-induced	81%	82%	78%	—	—	78%	82%	81%
Drug-related	19%	18%	22%	—	—	22%	18%	19%
<b>Manner of death</b>								
Suicide	22%	12%	47%	—	—	28%	20%	21%
Accidental/unexpected	65%	77%	38%	—	—	67%	68%	63%
All others	13%	12%	16%	—	—	6%	11%	17%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	—	—	—	—	46	—
Cocaine	—	—	—	—	63	12
Heroin/morphine	—	—	—	—	23	2
Marijuana	—	—	—	—	5	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	—	—	—
Club drugs <sup>1</sup>	—	—	—	—	—	—
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	—	—	—	—	60	—
Other analgesics	—	—	—	—	16	—
Benzodiazepines	—	—	—	—	28	—
Antidepressants	—	—	—	—	30	1
All other substances <sup>3</sup>	—	—	—	—	47	3
<b>Total drug deaths</b>	—	—	—	—	110	18
<b>Total drug mentions</b>	—	—	—	—	318	—
<b>Total deaths certified</b>	—	—	—	—	1,936	—

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Minneapolis-St. Paul: Hennepin County, MN



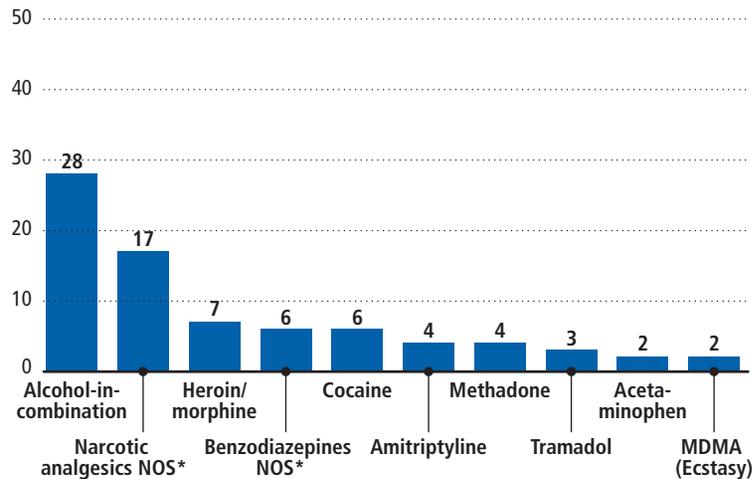
## Hennepin County, MN: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	52
Drug-induced	48
Drug-related	4
<b>Total deaths certified</b> 1,314	
<b>Population (2000)</b> 1,116,200	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

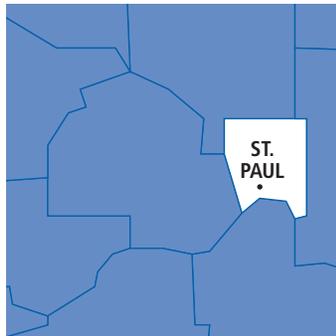
	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	54%	62%	39%	—	50%	71%	55%	48%
<b>Number of drugs involved</b>								
Single-drug	38%	35%	44%	—	50%	29%	36%	43%
Multi-drug	62%	65%	56%	—	50%	71%	64%	57%
<b>Cause of death</b>								
Drug-induced	92%	91%	94%	—	100%	86%	95%	90%
Drug-related	8%	9%	6%	—	—	14%	5%	10%
<b>Manner of death</b>								
Suicide	31%	12%	67%	—	—	43%	18%	43%
Accidental/unexpected	58%	74%	28%	—	50%	43%	73%	48%
All others	12%	15%	6%	—	50%	14%	9%	10%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	4	24	27	24	28	—
Cocaine	1	27	8	13	6	3
Heroin/morphine	—	18	21	16	7	4
Marijuana	—	—	—	—	—	—
Amphetamines	1	1	—	—	—	—
Methamphetamine	1	2	2	2	—	—
Club drugs <sup>1</sup>	—	—	1	1	2	1
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	1	—	—	—	—
Narcotic analgesics <sup>3</sup>	5	16	13	8	25	5
Other analgesics	1	2	2	2	6	2
Benzodiazepines	1	6	1	2	7	—
Antidepressants	6	10	23	15	7	3
All other substances <sup>3</sup>	3	15	12	4	11	2
<b>Total drug deaths</b>	<b>16</b>	<b>57</b>	<b>56</b>	<b>45</b>	<b>52</b>	<b>20</b>
<b>Total drug mentions</b>	<b>23</b>	<b>122</b>	<b>110</b>	<b>87</b>	<b>99</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,381</b>	<b>1,401</b>	<b>1,348</b>	<b>1,274</b>	<b>1,314</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Minneapolis-St. Paul: Ramsey County, MN



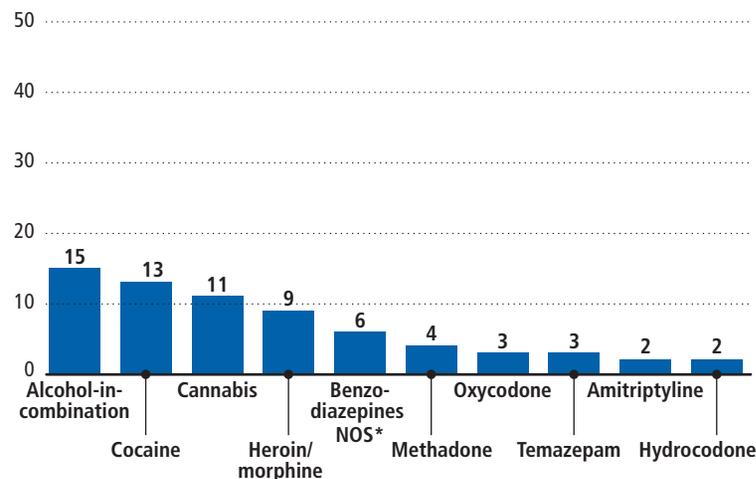
## Ramsey County, MN: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	36
Drug-induced	18
Drug-related	18
<b>Total deaths certified</b> 1,344	
<b>Population (2000)</b> 511,035	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	42%	50%	13%	—	100%	33%	46%	44%
<b>Number of drugs involved</b>								
Single-drug	31%	29%	38%	100%	—	33%	15%	44%
Multi-drug	69%	71%	63%	—	100%	67%	85%	56%
<b>Cause of death</b>								
Drug-induced	50%	46%	63%	100%	—	58%	38%	56%
Drug-related	50%	54%	38%	—	100%	42%	62%	44%
<b>Manner of death</b>								
Suicide	17%	18%	13%	—	—	—	23%	33%
Accidental/unexpected	58%	57%	63%	100%	100%	67%	69%	22%
All others	25%	25%	25%	—	—	33%	8%	44%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	10	12	12	9	15	—
Cocaine	7	8	8	17	13	2
Heroin/morphine	2	7	10	11	9	3
Marijuana	9	9	12	9	11	3
Amphetamines	1	2	6	3	1	—
Methamphetamine	2	2	4	3	2	—
Club drugs <sup>1</sup>	—	—	—	1	2	1
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	3	11	12	18	11	1
Other analgesics	7	5	6	7	1	—
Benzodiazepines	1	4	7	8	12	1
Antidepressants	10	5	10	13	5	—
All other substances <sup>3</sup>	8	11	16	14	5	—
<b>Total drug deaths</b>	<b>27</b>	<b>29</b>	<b>39</b>	<b>37</b>	<b>36</b>	<b>11</b>
<b>Total drug mentions</b>	<b>60</b>	<b>76</b>	<b>103</b>	<b>113</b>	<b>87</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,182</b>	<b>1,276</b>	<b>1,302</b>	<b>1,253</b>	<b>1,344</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# New Orleans: Orleans Parish, LA



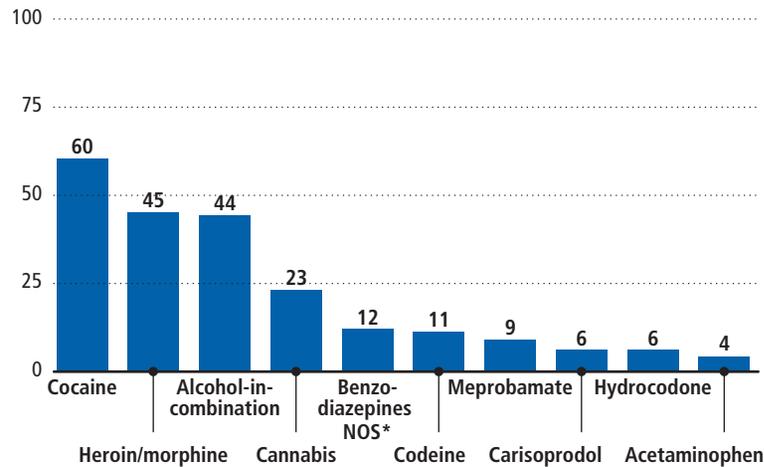
## Orleans Parish, LA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	103
Drug-induced	72
Drug-related	31
<b>Total deaths certified</b> 1,844	
<b>Population (2000)</b> 484,674	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	43%	45%	31%	—	25%	37%	56%	41%
<b>Number of drugs involved</b>								
Single-drug	22%	22%	19%	—	38%	26%	11%	25%
Multi-drug	78%	78%	81%	—	63%	74%	89%	75%
<b>Cause of death</b>								
Drug-induced	70%	65%	94%	—	81%	58%	75%	66%
Drug-related	30%	35%	6%	—	19%	42%	25%	34%
<b>Manner of death</b>								
Suicide	17%	15%	31%	—	13%	32%	14%	16%
Accidental/unexpected	40%	41%	31%	—	56%	21%	47%	34%
All others	43%	44%	38%	—	31%	47%	39%	50%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	30	19	25	41	44	—
Cocaine	38	36	36	50	60	10
Heroin/morphine	15	16	28	37	45	4
Marijuana	9	13	21	21	23	6
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	—	—	—
Club drugs <sup>1</sup>	1	—	1	4	2	—
Hallucinogens <sup>2</sup>	—	—	—	1	—	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	7	13	21	52	25	—
Other analgesics	6	8	7	3	6	—
Benzodiazepines	2	—	14	6	13	1
Antidepressants	2	4	2	12	7	—
All other substances <sup>3</sup>	4	15	12	37	25	2
<b>Total drug deaths</b>	<b>60</b>	<b>56</b>	<b>76</b>	<b>94</b>	<b>103</b>	<b>23</b>
<b>Total drug mentions</b>	<b>114</b>	<b>124</b>	<b>167</b>	<b>264</b>	<b>250</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,243</b>	<b>2,086</b>	<b>2,027</b>	<b>1,895</b>	<b>1,844</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# New York: Bronx County, NY



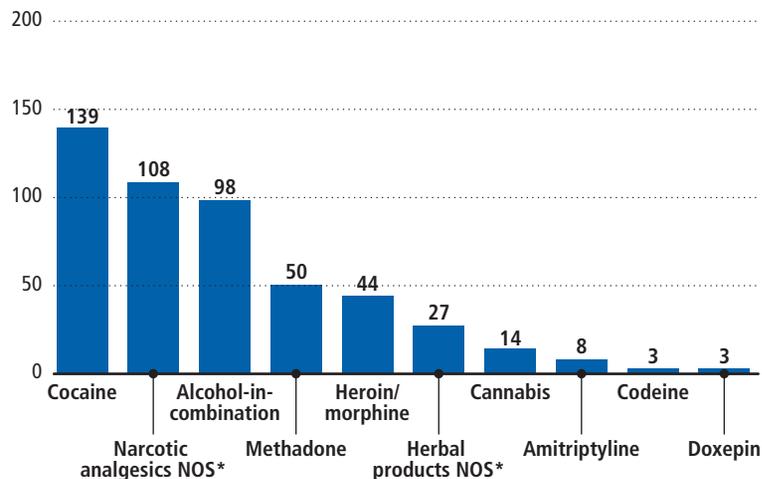
## Bronx County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	239
Drug-induced	169
Drug-related	70
<b>Total deaths certified</b> 1,730	
<b>Population (2000)</b> 1,332,650	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	41%	46%	28%	—	10%	45%	50%	34%
<b>Number of drugs involved</b>								
Single-drug	28%	25%	37%	—	10%	29%	23%	35%
Multi-drug	72%	75%	63%	—	90%	71%	77%	65%
<b>Cause of death</b>								
Drug-induced	71%	73%	66%	—	70%	76%	71%	68%
Drug-related	29%	27%	34%	—	30%	24%	29%	32%
<b>Manner of death</b>								
Suicide	4%	4%	5%	—	10%	11%	2%	3%
Accidental/unexpected	77%	83%	62%	—	80%	76%	82%	72%
All others	19%	13%	34%	—	10%	13%	16%	25%

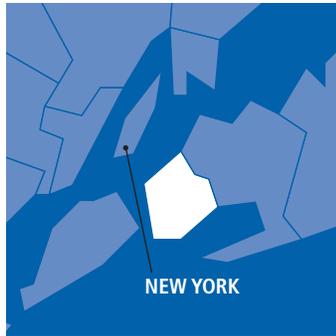
## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	106	88	76	60	98	—
Cocaine	143	133	105	97	139	47
Heroin/morphine	48	61	58	46	44	1
Marijuana	23	6	6	3	14	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	1	—	1	—	—
Club drugs <sup>1</sup>	1	—	1	—	1	—
Hallucinogens <sup>2</sup>	—	—	—	1	1	1
Inhalants	1	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	107	97	55	56	163	17
Other analgesics	2	2	4	—	3	—
Benzodiazepines	10	11	—	1	3	—
Antidepressants	17	16	8	5	13	2
All other substances <sup>3</sup>	24	11	8	16	32	—
<b>Total drug deaths</b>	<b>221</b>	<b>224</b>	<b>181</b>	<b>169</b>	<b>239</b>	<b>68</b>
<b>Total drug mentions</b>	<b>482</b>	<b>426</b>	<b>321</b>	<b>286</b>	<b>511</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,901</b>	<b>1,990</b>	<b>1,746</b>	<b>1,832</b>	<b>1,730</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# New York: Kings County (Brooklyn), NY



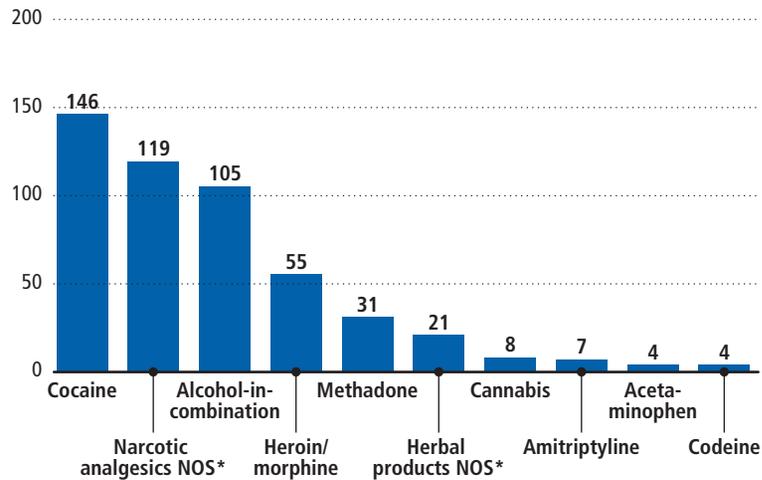
## Kings County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	261
Drug-induced	218
Drug-related	43
<b>Total deaths certified</b> 2,571	
<b>Population (2000)</b> 2,465,326	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	40%	44%	27%	—	47%	41%	37%	42%
<b>Number of drugs involved</b>								
Single-drug	33%	31%	38%	100%	20%	32%	35%	33%
Multi-drug	67%	69%	62%	—	80%	68%	65%	67%
<b>Cause of death</b>								
Drug-induced	84%	83%	85%	100%	87%	89%	87%	76%
Drug-related	16%	17%	15%	—	13%	11%	13%	24%
<b>Manner of death</b>								
Suicide	5%	5%	5%	—	20%	5%	3%	5%
Accidental/unexpected	82%	84%	78%	100%	80%	86%	85%	78%
All others	12%	11%	17%	—	—	9%	12%	17%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	110	112	87	90	105	—
Cocaine	170	117	123	110	146	63
Heroin/morphine	54	78	56	50	55	—
Marijuana	24	9	8	2	8	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	2	—	—	1	—
Club drugs <sup>1</sup>	—	2	—	—	2	—
Hallucinogens <sup>2</sup>	—	—	—	1	2	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	130	98	83	71	159	19
Other analgesics	3	8	6	3	7	2
Benzodiazepines	11	8	2	—	5	—
Antidepressants	20	19	12	5	15	1
All other substances <sup>3</sup>	46	8	6	14	27	1
<b>Total drug deaths</b>	<b>279</b>	<b>238</b>	<b>207</b>	<b>196</b>	<b>261</b>	<b>86</b>
<b>Total drug mentions</b>	<b>568</b>	<b>461</b>	<b>383</b>	<b>346</b>	<b>532</b>	<b>—</b>
<b>Total deaths certified</b>	<b>3,076</b>	<b>2,670</b>	<b>2,779</b>	<b>2,753</b>	<b>2,571</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# New York: New York County (Manhattan), NY



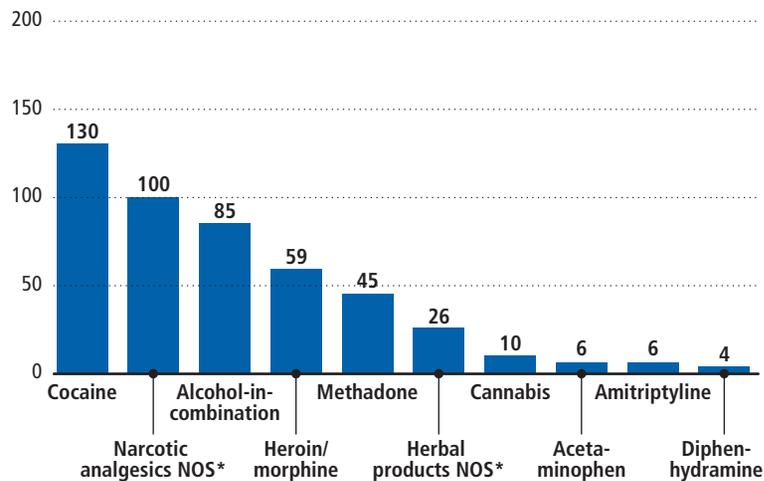
## New York County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	246
Drug-induced	184
Drug-related	62
<b>Total deaths certified</b> 2,496	
<b>Population (2000)</b> 1,537,195	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	35%	34%	32%	—	58%	40%	32%	32%
<b>Number of drugs involved</b>								
Single-drug	31%	31%	33%	—	17%	26%	31%	35%
Multi-drug	69%	69%	67%	100%	83%	74%	69%	65%
<b>Cause of death</b>								
Drug-induced	75%	74%	78%	100%	67%	86%	80%	66%
Drug-related	25%	26%	22%	—	33%	14%	20%	34%
<b>Manner of death</b>								
Suicide	9%	6%	17%	—	33%	5%	10%	7%
Accidental/unexpected	72%	76%	62%	100%	67%	86%	77%	62%
All others	19%	18%	21%	—	—	10%	13%	31%

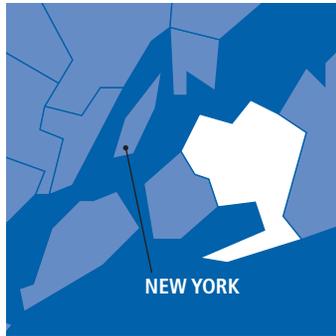
## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	147	122	97	102	85	—
Cocaine	230	170	136	126	130	51
Heroin/morphine	51	85	68	49	59	—
Marijuana	33	16	6	9	10	—
Amphetamines	2	—	—	—	1	—
Methamphetamine	—	1	—	1	2	1
Club drugs <sup>1</sup>	1	3	—	4	2	1
Hallucinogens <sup>2</sup>	3	1	—	1	1	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	178	82	68	92	155	20
Other analgesics	12	13	13	10	11	2
Benzodiazepines	19	10	2	4	6	—
Antidepressants	28	16	10	8	13	—
All other substances <sup>3</sup>	56	24	7	24	43	1
<b>Total drug deaths</b>	<b>366</b>	<b>285</b>	<b>227</b>	<b>235</b>	<b>246</b>	<b>76</b>
<b>Total drug mentions</b>	<b>760</b>	<b>543</b>	<b>407</b>	<b>430</b>	<b>518</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,909</b>	<b>2,497</b>	<b>2,373</b>	<b>2,390</b>	<b>2,496</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# New York: Queens County, NY



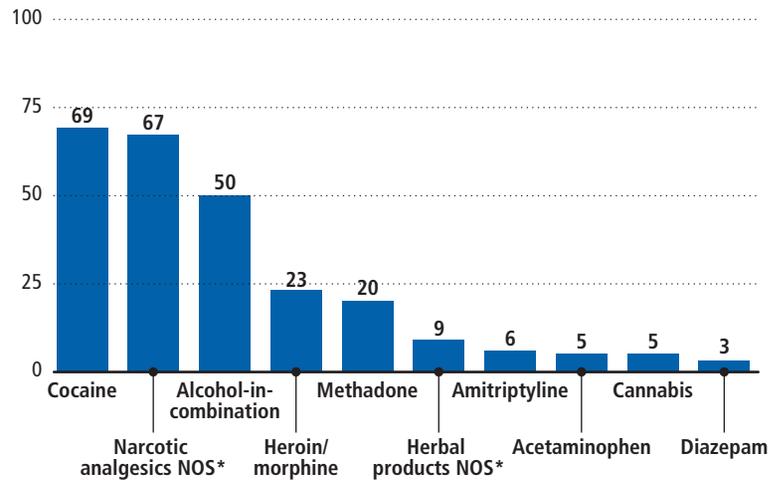
## Queens County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	150
Drug-induced	117
Drug-related	33
<b>Total deaths certified</b> 1,850	
<b>Population (2000)</b> 2,229,379	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

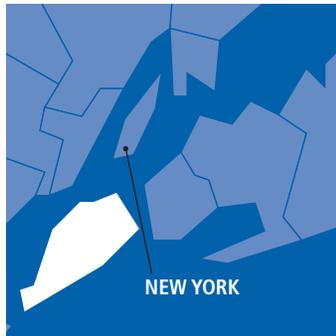
	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	33%	35%	29%	—	38%	12%	38%	37%
<b>Number of drugs involved</b>								
Single-drug	33%	32%	34%	—	—	44%	33%	32%
Multi-drug	67%	68%	66%	—	100%	56%	67%	68%
<b>Cause of death</b>								
Drug-induced	78%	78%	77%	—	75%	80%	80%	75%
Drug-related	22%	22%	23%	—	25%	20%	20%	25%
<b>Manner of death</b>								
Suicide	14%	13%	17%	—	25%	4%	8%	23%
Accidental/unexpected	71%	72%	66%	—	75%	88%	75%	58%
All others	15%	15%	17%	—	—	8%	17%	19%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	52	55	46	45	50	—
Cocaine	90	70	62	50	69	32
Heroin/morphine	33	34	41	21	23	—
Marijuana	25	7	6	2	5	—
Amphetamines	1	1	—	—	—	—
Methamphetamine	—	1	—	—	—	—
Club drugs <sup>1</sup>	—	1	—	—	—	—
Hallucinogens <sup>2</sup>	1	—	—	—	2	—
Inhalants	1	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	78	46	42	43	92	11
Other analgesics	7	5	5	9	7	2
Benzodiazepines	13	4	2	5	7	—
Antidepressants	14	7	7	10	10	—
All other substances <sup>3</sup>	24	11	4	17	22	4
<b>Total drug deaths</b>	<b>171</b>	<b>129</b>	<b>119</b>	<b>106</b>	<b>150</b>	<b>49</b>
<b>Total drug mentions</b>	<b>339</b>	<b>242</b>	<b>215</b>	<b>202</b>	<b>287</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,153</b>	<b>1,987</b>	<b>1,853</b>	<b>2,039</b>	<b>1,850</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# New York: Richmond County (Staten Island), NY



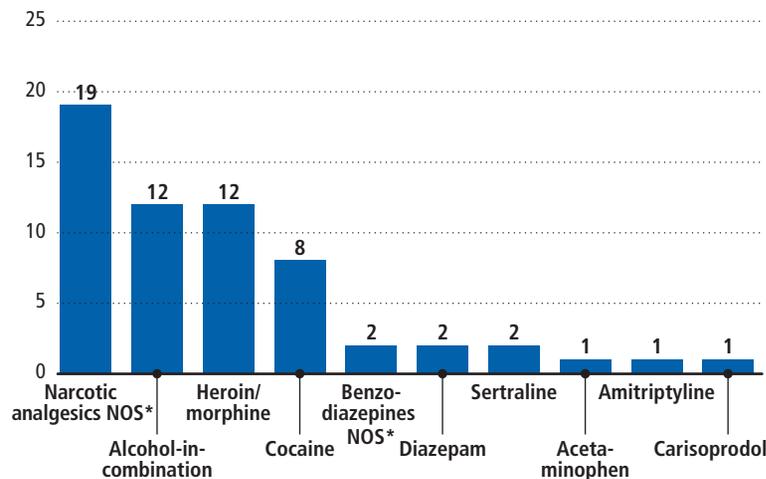
## Richmond County, NY: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	27
Drug-induced	24
Drug-related	3
<b>Total deaths certified</b> 271	
<b>Population (2000)</b> 443,728	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	44%	48%	25%	—	—	38%	47%	67%
<b>Number of drugs involved</b>								
Single-drug	19%	17%	25%	—	100%	13%	20%	—
Multi-drug	81%	83%	75%	—	—	88%	80%	100%
<b>Cause of death</b>								
Drug-induced	89%	91%	75%	—	100%	88%	87%	100%
Drug-related	11%	9%	25%	—	—	13%	13%	—
<b>Manner of death</b>								
Suicide	11%	13%	—	—	—	13%	7%	33%
Accidental/unexpected	78%	83%	50%	—	100%	88%	73%	67%
All others	11%	4%	50%	—	—	—	20%	—

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	18	13	9	11	12	—
Cocaine	26	11	11	9	8	3
Heroin/morphine	6	11	7	5	12	—
Marijuana	9	—	4	2	—	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	—	—	—
Club drugs <sup>1</sup>	—	—	1	—	—	—
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	17	12	4	7	21	2
Other analgesics	3	2	3	1	2	—
Benzodiazepines	4	1	—	2	4	—
Antidepressants	2	2	1	2	3	—
All other substances <sup>3</sup>	7	4	—	3	1	—
<b>Total drug deaths</b>	<b>44</b>	<b>31</b>	<b>21</b>	<b>20</b>	<b>27</b>	<b>5</b>
<b>Total drug mentions</b>	<b>92</b>	<b>56</b>	<b>40</b>	<b>42</b>	<b>63</b>	<b>—</b>
<b>Total deaths certified</b>	<b>314</b>	<b>338</b>	<b>340</b>	<b>261</b>	<b>271</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Newark: Essex County, NJ



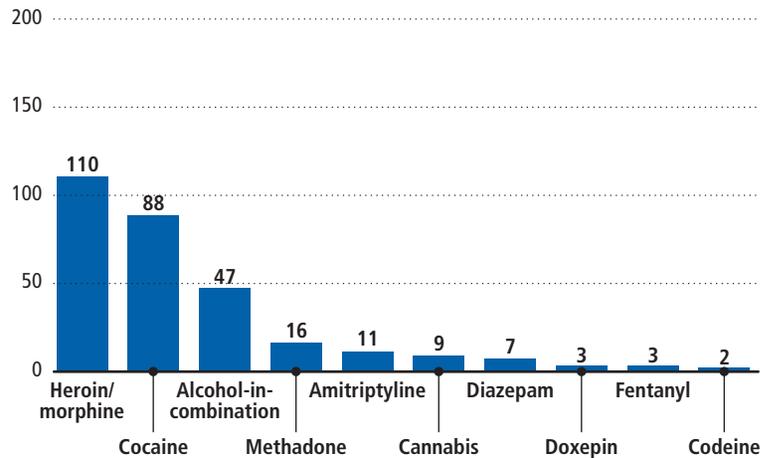
## Essex County, NJ: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	158
Drug-induced	129
Drug-related	29
<b>Total deaths certified</b> 2,487	
<b>Population (2000)</b> 793,633	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	30%	32%	23%	—	27%	32%	31%	26%
<b>Number of drugs involved</b>								
Single-drug	29%	31%	25%	100%	9%	27%	31%	29%
Multi-drug	71%	69%	75%	—	91%	73%	69%	71%
<b>Cause of death</b>								
Drug-induced	82%	82%	80%	—	73%	84%	89%	74%
Drug-related	18%	18%	20%	100%	27%	16%	11%	26%
<b>Manner of death</b>								
Suicide	2%	3%	—	—	9%	—	1%	3%
Accidental/unexpected	97%	96%	100%	100%	91%	100%	99%	95%
All others	1%	1%	—	—	—	—	—	3%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	57	50	35	50	47	—
Cocaine	111	104	86	92	88	18
Heroin/morphine	92	94	61	81	110	20
Marijuana	11	20	14	18	9	4
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	—	1	—
Club drugs <sup>1</sup>	—	—	—	—	1	—
Hallucinogens <sup>2</sup>	—	—	—	—	1	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	20	13	15	22	25	3
Other analgesics	9	5	2	5	—	—
Benzodiazepines	24	13	12	11	9	—
Antidepressants	12	20	11	11	22	1
All other substances <sup>3</sup>	9	7	8	6	2	—
<b>Total drug deaths</b>	<b>160</b>	<b>145</b>	<b>127</b>	<b>144</b>	<b>158</b>	<b>46</b>
<b>Total drug mentions</b>	<b>345</b>	<b>326</b>	<b>244</b>	<b>296</b>	<b>315</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,739</b>	<b>2,446</b>	<b>2,738</b>	<b>2,620</b>	<b>2,487</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Philadelphia: Camden County, NJ



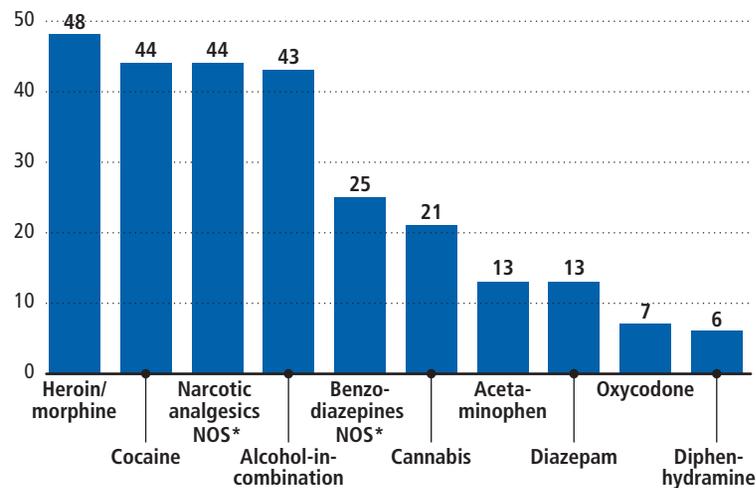
## Camden County, NJ: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	117
Drug-induced	68
Drug-related	49
<b>Total deaths certified</b> 1,497	
<b>Population (2000)</b> 508,932	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	37%	38%	33%	—	47%	42%	32%	34%
<b>Number of drugs involved</b>								
Single-drug	17%	19%	8%	100%	7%	13%	19%	19%
Multi-drug	83%	81%	92%	—	93%	87%	81%	81%
<b>Cause of death</b>								
Drug-induced	58%	59%	50%	—	67%	71%	62%	41%
Drug-related	42%	41%	50%	100%	33%	29%	38%	59%
<b>Manner of death</b>								
Suicide	16%	15%	21%	—	7%	19%	14%	22%
Accidental/unexpected	62%	64%	54%	100%	87%	61%	62%	50%
All others	21%	21%	25%	—	7%	19%	24%	28%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	5	41	32	43	43	—
Cocaine	2	60	32	51	44	6
Heroin/morphine	6	75	31	42	48	3
Marijuana	4	22	28	18	21	6
Amphetamines	—	1	1	1	—	—
Methamphetamine	—	1	1	—	—	—
Club drugs <sup>1</sup>	—	—	—	1	—	—
Hallucinogens <sup>2</sup>	—	1	4	2	2	—
Inhalants	—	3	1	4	—	—
Narcotic analgesics <sup>3</sup>	2	31	28	27	64	3
Other analgesics	2	16	13	20	21	—
Benzodiazepines	3	62	46	44	52	1
Antidepressants	1	12	20	7	27	—
All other substances <sup>3</sup>	2	50	25	45	35	1
<b>Total drug deaths</b>	<b>12</b>	<b>127</b>	<b>98</b>	<b>108</b>	<b>117</b>	<b>20</b>
<b>Total drug mentions</b>	<b>27</b>	<b>375</b>	<b>262</b>	<b>305</b>	<b>357</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,518</b>	<b>1,642</b>	<b>1,446</b>	<b>1,397</b>	<b>1,497</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Philadelphia: Philadelphia County, PA



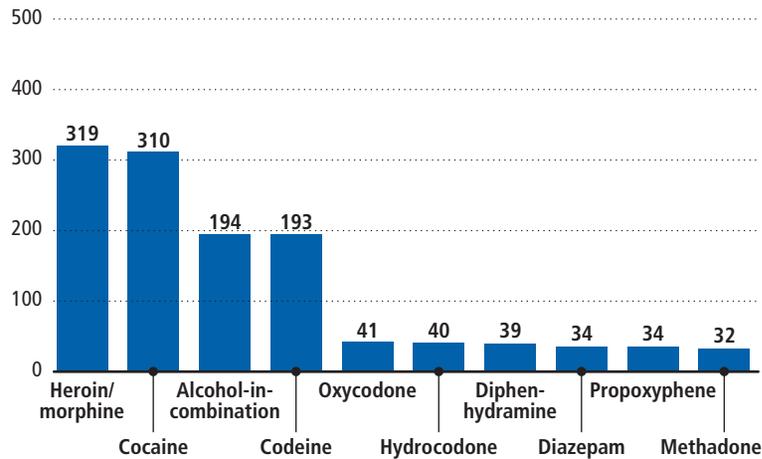
## Philadelphia County, PA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	528
Drug-induced	415
Drug-related	113
<b>Total deaths certified</b> 5,666	
<b>Population (2000)</b> 1,517,550	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

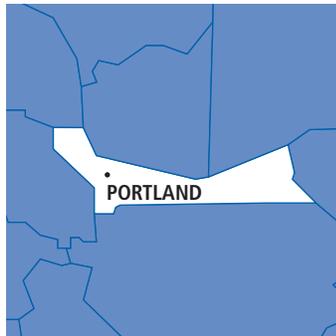
	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	37%	40%	27%	—	28%	38%	43%	33%
<b>Number of drugs involved</b>								
Single-drug	15%	14%	17%	—	15%	12%	10%	22%
Multi-drug	85%	86%	83%	100%	85%	88%	90%	78%
<b>Cause of death</b>								
Drug-induced	79%	79%	77%	100%	83%	78%	82%	74%
Drug-related	21%	21%	23%	—	17%	22%	18%	26%
<b>Manner of death</b>								
Suicide	9%	9%	9%	—	4%	11%	5%	12%
Accidental/unexpected	75%	76%	71%	67%	94%	83%	79%	61%
All others	16%	15%	20%	33%	2%	6%	15%	27%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	136	160	137	144	194	—
Cocaine	244	326	276	293	310	55
Heroin/morphine	268	380	272	254	319	13
Marijuana	1	—	—	—	—	—
Amphetamines	9	9	4	9	3	—
Methamphetamine	10	13	4	5	3	—
Club drugs <sup>1</sup>	—	1	—	6	5	1
Hallucinogens <sup>2</sup>	14	25	24	22	25	5
Inhalants	1	2	—	1	—	—
Narcotic analgesics <sup>3</sup>	184	311	221	271	348	2
Other analgesics	17	40	27	10	12	—
Benzodiazepines	67	80	95	58	72	2
Antidepressants	54	94	170	127	156	—
All other substances <sup>3</sup>	164	198	212	203	234	1
<b>Total drug deaths</b>	<b>429</b>	<b>554</b>	<b>467</b>	<b>453</b>	<b>528</b>	<b>79</b>
<b>Total drug mentions</b>	<b>1,169</b>	<b>1,639</b>	<b>1,442</b>	<b>1,403</b>	<b>1,681</b>	<b>—</b>
<b>Total deaths certified</b>	<b>5,748</b>	<b>5,710</b>	<b>5,632</b>	<b>5,841</b>	<b>5,666</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Portland: Multnomah County, OR



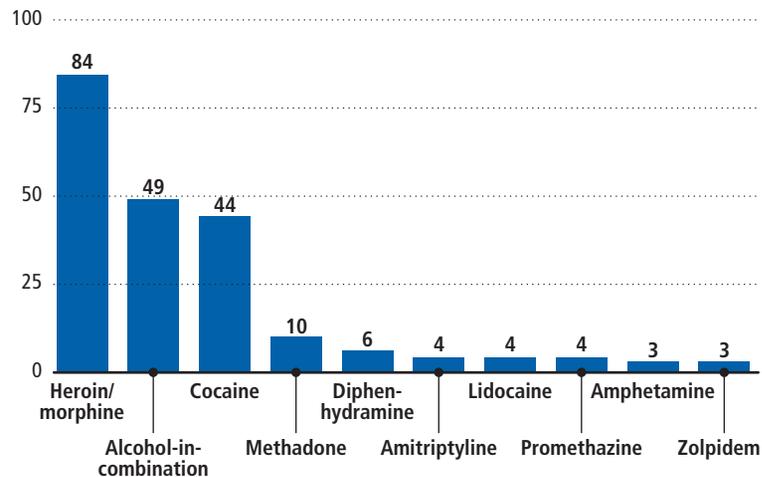
## Multnomah County, OR: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	119
Drug-induced	110
Drug-related	9
<b>Total deaths certified</b>	
	839
<b>Population (2000)</b>	
	660,486

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	41%	44%	32%	—	33%	41%	44%	40%
<b>Number of drugs involved</b>								
Single-drug	29%	31%	24%	—	50%	36%	21%	33%
Multi-drug	71%	69%	76%	—	50%	64%	79%	67%
<b>Cause of death</b>								
Drug-induced	92%	94%	92%	—	67%	95%	98%	88%
Drug-related	8%	6%	8%	—	33%	5%	2%	12%
<b>Manner of death</b>								
Suicide	11%	10%	16%	—	33%	14%	10%	7%
Accidental/unexpected	78%	82%	68%	—	67%	68%	83%	79%
All others	11%	9%	16%	—	—	18%	6%	14%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	66	66	62	68	49	—
Cocaine	44	38	45	54	44	6
Heroin/morphine	100	98	104	125	84	18
Marijuana	1	—	—	—	—	—
Amphetamines	10	4	3	13	3	1
Methamphetamine	6	4	5	3	—	—
Club drugs <sup>1</sup>	—	—	—	—	1	1
Hallucinogens <sup>2</sup>	—	—	—	1	—	—
Inhalants	3	—	1	—	—	—
Narcotic analgesics <sup>3</sup>	14	8	10	19	16	5
Other analgesics	1	2	—	3	—	—
Benzodiazepines	1	3	7	5	1	—
Antidepressants	16	15	5	16	16	—
All other substances <sup>3</sup>	7	7	6	16	28	4
<b>Total drug deaths</b>	<b>140</b>	<b>127</b>	<b>129</b>	<b>162</b>	<b>119</b>	<b>35</b>
<b>Total drug mentions</b>	<b>269</b>	<b>245</b>	<b>248</b>	<b>323</b>	<b>242</b>	<b>—</b>
<b>Total deaths certified</b>	<b>915</b>	<b>931</b>	<b>862</b>	<b>872</b>	<b>839</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# St. Louis: St. Louis City, MO



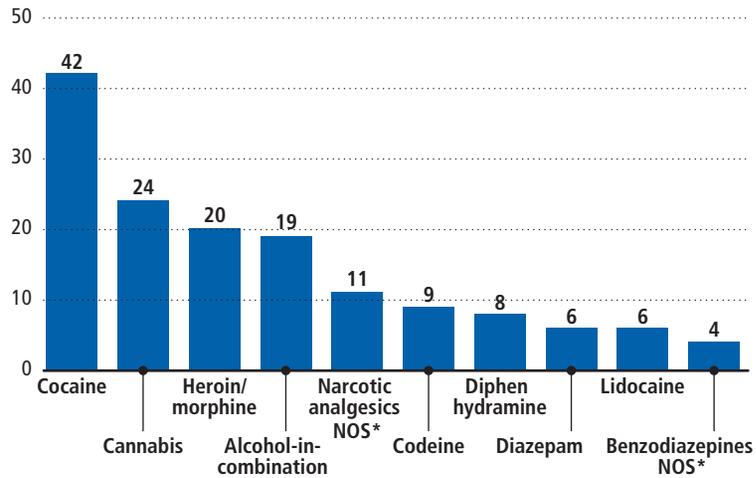
## St. Louis City, MO: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	74
Drug-induced	9
Drug-related	65
<b>Total deaths certified</b> 2,460	
<b>Population (2000)</b> 348,189	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	26%	30%	15%	—	50%	26%	26%	19%
<b>Number of drugs involved</b>								
Single-drug	26%	30%	15%	50%	17%	32%	19%	31%
Multi-drug	74%	70%	85%	50%	83%	68%	81%	69%
<b>Cause of death</b>								
Drug-induced	12%	6%	30%	—	33%	5%	13%	13%
Drug-related	88%	94%	70%	100%	67%	95%	87%	88%
<b>Manner of death</b>								
Suicide	9%	11%	5%	—	33%	5%	13%	—
Accidental/unexpected	61%	56%	75%	100%	67%	89%	52%	38%
All others	30%	33%	20%	—	—	5%	35%	63%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	12	20	15	17	19	—
Cocaine	46	50	51	47	42	11
Heroin/morphine	28	29	27	27	20	—
Marijuana	34	24	24	32	24	6
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	2	2	1	1	—
Club drugs <sup>1</sup>	—	—	—	2	2	—
Hallucinogens <sup>2</sup>	3	—	1	—	2	1
Inhalants	1	—	1	—	3	—
Narcotic analgesics <sup>3</sup>	23	19	15	10	23	—
Other analgesics	9	4	9	3	2	—
Benzodiazepines	14	21	11	9	15	—
Antidepressants	10	12	4	6	7	—
All other substances <sup>3</sup>	17	9	13	22	21	1
<b>Total drug deaths</b>	<b>89</b>	<b>91</b>	<b>84</b>	<b>87</b>	<b>74</b>	<b>19</b>
<b>Total drug mentions</b>	<b>197</b>	<b>190</b>	<b>173</b>	<b>176</b>	<b>181</b>	<b>—</b>
<b>Total deaths certified</b>	<b>2,738</b>	<b>2,535</b>	<b>2,511</b>	<b>2,524</b>	<b>2,460</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# St. Louis: St. Louis County, MO



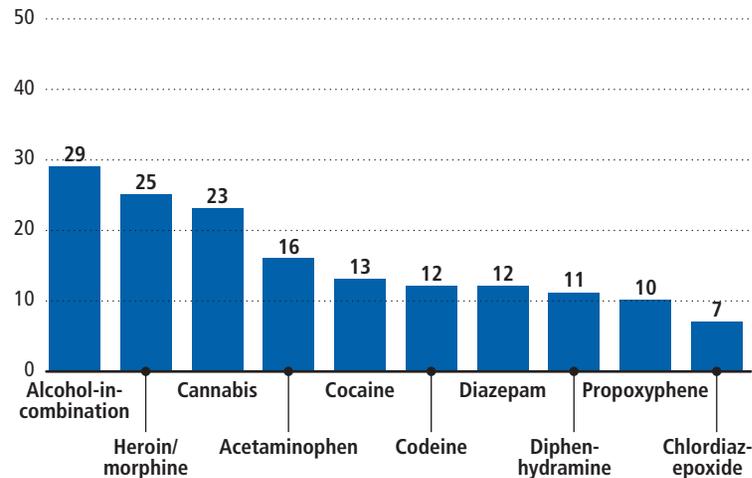
## St. Louis County, MO: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	116
Drug-induced	35
Drug-related	81
<b>Total deaths certified</b> 4,427	
<b>Population (2000)</b> 1,016,315	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	25%	28%	19%	—	21%	18%	35%	22%
<b>Number of drugs involved</b>								
Single-drug	34%	35%	32%	60%	36%	18%	33%	41%
Multi-drug	66%	65%	68%	40%	64%	82%	67%	59%
<b>Cause of death</b>								
Drug-induced	30%	35%	19%	20%	50%	53%	30%	14%
Drug-related	70%	65%	81%	80%	50%	47%	70%	86%
<b>Manner of death</b>								
Suicide	27%	28%	24%	40%	21%	41%	19%	30%
Accidental/unexpected	41%	48%	27%	20%	71%	29%	40%	41%
All others	32%	24%	49%	40%	7%	29%	42%	30%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	33	21	27	33	29	—
Cocaine	13	12	15	15	13	4
Heroin/morphine	8	8	15	22	25	4
Marijuana	26	11	12	23	23	10
Amphetamines	—	—	1	—	2	—
Methamphetamine	—	—	3	1	1	—
Club drugs <sup>1</sup>	—	—	—	1	—	—
Hallucinogens <sup>2</sup>	—	—	—	1	1	—
Inhalants	1	3	1	3	1	—
Narcotic analgesics <sup>3</sup>	32	24	20	31	33	1
Other analgesics	34	18	22	25	21	1
Benzodiazepines	25	20	19	24	22	2
Antidepressants	18	11	22	24	26	2
All other substances <sup>3</sup>	36	20	19	46	61	16
<b>Total drug deaths</b>	<b>114</b>	<b>74</b>	<b>81</b>	<b>116</b>	<b>116</b>	<b>40</b>
<b>Total drug mentions</b>	<b>226</b>	<b>148</b>	<b>176</b>	<b>249</b>	<b>258</b>	<b>—</b>
<b>Total deaths certified</b>	<b>4,174</b>	<b>4,279</b>	<b>4,280</b>	<b>4,420</b>	<b>4,427</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Salt Lake City: Salt Lake County, UT



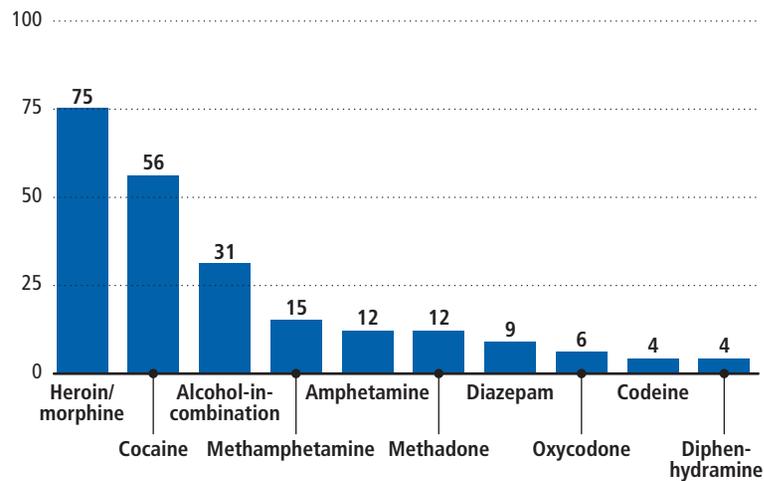
## Salt Lake County, UT: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	117
Drug-induced	109
Drug-related	8
<b>Total deaths certified</b> 688	
<b>Population (2000)</b> 898,387	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	26%	30%	12%	—	14%	14%	28%	42%
<b>Number of drugs involved</b>								
Single-drug	25%	25%	20%	—	14%	36%	16%	26%
Multi-drug	75%	75%	80%	—	86%	64%	84%	74%
<b>Cause of death</b>								
Drug-induced	93%	94%	92%	—	100%	94%	95%	87%
Drug-related	7%	6%	8%	—	—	6%	5%	13%
<b>Manner of death</b>								
Suicide	15%	11%	28%	—	43%	14%	14%	13%
Accidental/unexpected	3%	2%	4%	—	—	—	2%	6%
All others	82%	87%	68%	—	57%	86%	84%	81%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	21	27	28	30	31	—
Cocaine	35	43	74	74	56	6
Heroin/morphine	40	65	79	87	75	13
Marijuana	2	2	1	1	—	—
Amphetamines	5	7	14	23	12	—
Methamphetamine	6	10	21	23	15	1
Club drugs <sup>1</sup>	—	—	—	1	2	1
Hallucinogens <sup>2</sup>	—	—	—	—	1	—
Inhalants	1	—	—	1	—	—
Narcotic analgesics <sup>3</sup>	17	16	13	24	30	8
Other analgesics	—	1	2	—	3	—
Benzodiazepines	5	6	5	7	12	—
Antidepressants	4	17	2	7	8	—
All other substances <sup>3</sup>	13	10	9	7	9	—
<b>Total drug deaths</b>	<b>66</b>	<b>95</b>	<b>112</b>	<b>138</b>	<b>117</b>	<b>29</b>
<b>Total drug mentions</b>	<b>149</b>	<b>204</b>	<b>248</b>	<b>285</b>	<b>254</b>	<b>—</b>
<b>Total deaths certified</b>	<b>738</b>	<b>717</b>	<b>695</b>	<b>731</b>	<b>688</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# San Francisco: San Francisco County, CA



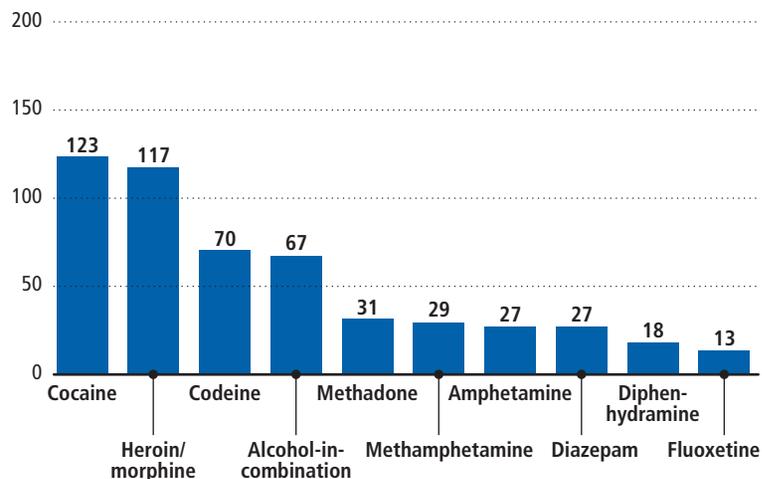
## San Francisco County, CA: Deaths and population, 2000

Deaths involving drug abuse	
Total	217
Drug-induced	141
Drug-related	76
<b>Total deaths certified</b> 1,375	
<b>Population (2000)</b> 776,733	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	31%	34%	14%	—	27%	38%	27%	31%
<b>Number of drugs involved</b>								
Single-drug	14%	13%	17%	—	—	12%	11%	18%
Multi-drug	86%	87%	83%	—	100%	88%	89%	82%
<b>Cause of death</b>								
Drug-induced	65%	67%	54%	—	91%	56%	67%	64%
Drug-related	35%	33%	46%	—	9%	44%	33%	36%
<b>Manner of death</b>								
Suicide	14%	14%	14%	—	—	18%	8%	19%
Accidental/unexpected	61%	64%	49%	—	91%	50%	64%	59%
All others	25%	23%	37%	—	9%	32%	27%	22%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	116	88	88	112	67	—
Cocaine	133	104	137	139	123	17
Heroin/morphine	168	123	145	166	117	5
Marijuana	1	—	—	—	—	—
Amphetamines	2	—	28	35	27	—
Methamphetamine	37	40	41	51	29	1
Club drugs <sup>1</sup>	—	4	1	5	6	—
Hallucinogens <sup>2</sup>	1	1	1	3	—	—
Inhalants	2	—	—	—	1	—
Narcotic analgesics <sup>3</sup>	135	123	150	159	128	—
Other analgesics	13	12	7	4	14	1
Benzodiazepines	48	43	46	38	39	—
Antidepressants	69	24	33	75	58	1
All other substances <sup>3</sup>	93	88	82	90	76	5
<b>Total drug deaths</b>	<b>297</b>	<b>227</b>	<b>253</b>	<b>287</b>	<b>217</b>	<b>30</b>
<b>Total drug mentions</b>	<b>818</b>	<b>650</b>	<b>759</b>	<b>877</b>	<b>685</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,722</b>	<b>1,645</b>	<b>1,636</b>	<b>1,539</b>	<b>1,375</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Seattle: King County, WA



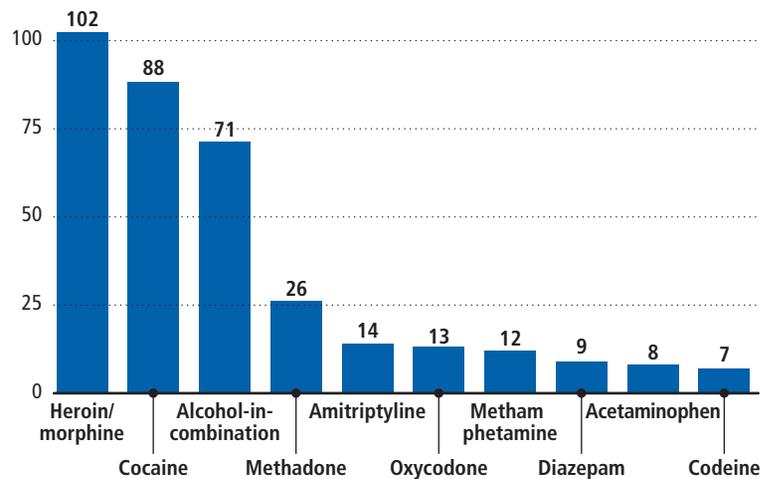
## King County, WA: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	215
Drug-induced	215
Drug-related	—
<b>Total deaths certified</b> 1,316	
<b>Population (2000)</b> 1,737,034	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	33%	38%	20%	—	38%	26%	37%	33%
<b>Number of drugs involved</b>								
Single-drug	32%	33%	29%	100%	50%	33%	28%	31%
Multi-drug	68%	67%	71%	—	50%	67%	72%	69%
<b>Cause of death</b>								
Drug-induced	100%	100%	100%	100%	100%	100%	100%	100%
Drug-related	—	—	—	—	—	—	—	—
<b>Manner of death</b>								
Suicide	12%	7%	25%	—	13%	8%	9%	18%
Accidental/unexpected	78%	85%	59%	100%	75%	82%	81%	74%
All others	10%	8%	15%	—	13%	10%	10%	9%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	85	74	95	61	71	—
Cocaine	73	65	68	76	88	29
Heroin/morphine	133	110	142	117	102	15
Marijuana	—	—	1	—	1	—
Amphetamines	1	2	—	1	1	—
Methamphetamine	3	3	3	28	12	3
Club drugs <sup>1</sup>	—	—	—	1	2	—
Hallucinogens <sup>2</sup>	—	—	—	—	—	—
Inhalants	—	—	—	—	1	—
Narcotic analgesics <sup>3</sup>	30	31	49	21	53	9
Other analgesics	18	20	11	13	21	6
Benzodiazepines	24	26	37	15	20	1
Antidepressants	38	40	63	48	59	4
All other substances <sup>3</sup>	28	34	50	36	34	2
<b>Total drug deaths</b>	<b>209</b>	<b>169</b>	<b>215</b>	<b>199</b>	<b>215</b>	<b>69</b>
<b>Total drug mentions</b>	<b>433</b>	<b>405</b>	<b>519</b>	<b>417</b>	<b>465</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,341</b>	<b>1,306</b>	<b>1,317</b>	<b>1,267</b>	<b>1,316</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Washington, DC: District of Columbia



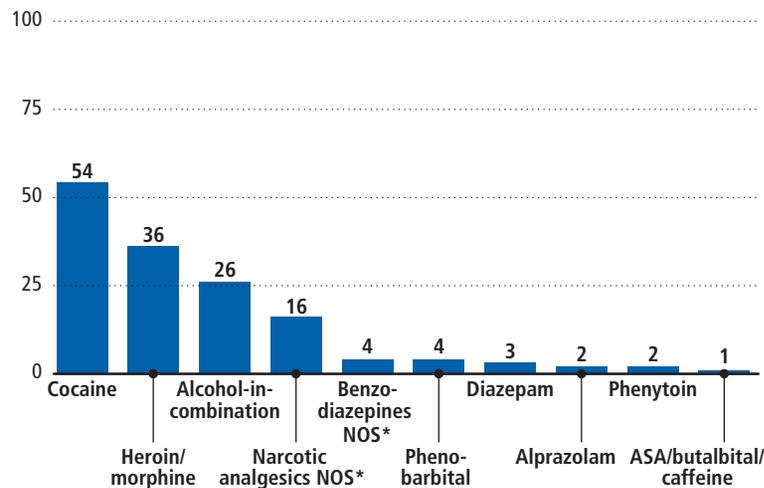
## District of Columbia: Deaths and population, 2000

Deaths involving drug abuse	
Total	100
Drug-induced	73
Drug-related	27
<b>Total deaths certified</b> 1,751	
<b>Population (2000)</b> 572,059	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



\* NOS = Not otherwise specified

## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	26%	33%	14%	—	—	40%	30%	23%
<b>Number of drugs involved</b>								
Single-drug	52%	41%	72%	100%	67%	40%	48%	55%
Multi-drug	48%	59%	28%	—	33%	60%	52%	45%
<b>Cause of death</b>								
Drug-induced	73%	77%	67%	—	67%	70%	85%	68%
Drug-related	27%	23%	33%	100%	33%	30%	15%	32%
<b>Manner of death</b>								
Suicide	6%	8%	3%	100%	33%	10%	—	6%
Accidental/unexpected	73%	81%	58%	—	67%	80%	76%	72%
All others	21%	11%	39%	—	—	10%	24%	23%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	28	29	44	37	26	—
Cocaine	57	33	63	64	54	23
Heroin/morphine	35	41	53	41	36	14
Marijuana	—	—	—	—	1	—
Amphetamines	—	—	—	—	1	1
Methamphetamine	—	—	1	—	1	—
Club drugs <sup>1</sup>	1	—	—	—	—	—
Hallucinogens <sup>2</sup>	2	1	—	2	1	—
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	6	6	22	15	20	6
Other analgesics	1	2	3	3	2	1
Benzodiazepines	4	13	13	11	10	3
Antidepressants	3	4	14	11	4	1
All other substances <sup>3</sup>	11	7	30	18	10	3
<b>Total drug deaths</b>	<b>87</b>	<b>79</b>	<b>145</b>	<b>121</b>	<b>100</b>	<b>52</b>
<b>Total drug mentions</b>	<b>148</b>	<b>136</b>	<b>243</b>	<b>202</b>	<b>166</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,543</b>	<b>1,414</b>	<b>1,607</b>	<b>1,763</b>	<b>1,751</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network 2000 (08/2001 update).

# Washington, DC: Montgomery County, MD



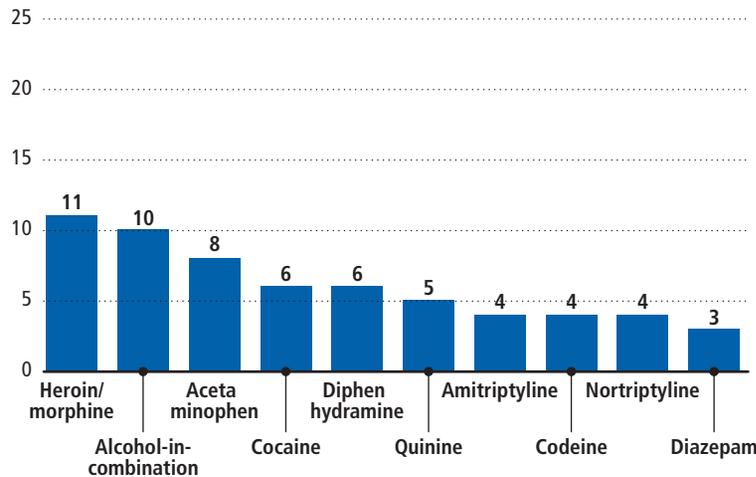
## Montgomery County, MD: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	34
Drug-induced	30
Drug-related	4
<b>Total deaths certified</b>	
	434
<b>Population (2000)</b>	
	873,341

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	29%	41%	8%	—	—	33%	36%	25%
<b>Number of drugs involved</b>								
Single-drug	24%	14%	42%	100%	—	50%	7%	25%
Multi-drug	76%	86%	58%	—	100%	50%	93%	75%
<b>Cause of death</b>								
Drug-induced	88%	82%	100%	100%	100%	83%	79%	100%
Drug-related	12%	18%	—	—	—	17%	21%	—
<b>Manner of death</b>								
Suicide	29%	18%	50%	100%	—	50%	21%	25%
Accidental/unexpected	6%	9%	—	—	—	—	14%	—
All others	65%	73%	50%	—	100%	50%	64%	75%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	8	14	8	8	10	—
Cocaine	8	12	5	9	6	—
Heroin/morphine	16	13	9	13	11	—
Marijuana	—	—	—	—	2	2
Amphetamines	—	1	—	—	—	—
Methamphetamine	—	1	—	2	—	—
Club drugs <sup>1</sup>	—	—	—	—	—	—
Hallucinogens <sup>2</sup>	1	—	—	—	1	1
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	11	13	9	11	18	1
Other analgesics	3	9	3	9	9	—
Benzodiazepines	2	7	3	4	5	1
Antidepressants	11	16	8	12	18	1
All other substances <sup>3</sup>	18	32	12	27	21	2
<b>Total drug deaths</b>	<b>22</b>	<b>32</b>	<b>18</b>	<b>26</b>	<b>34</b>	<b>8</b>
<b>Total drug mentions</b>	<b>78</b>	<b>118</b>	<b>57</b>	<b>95</b>	<b>101</b>	<b>—</b>
<b>Total deaths certified</b>	<b>475</b>	<b>524</b>	<b>473</b>	<b>500</b>	<b>434</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.

# Washington, DC: Prince George's County, MD



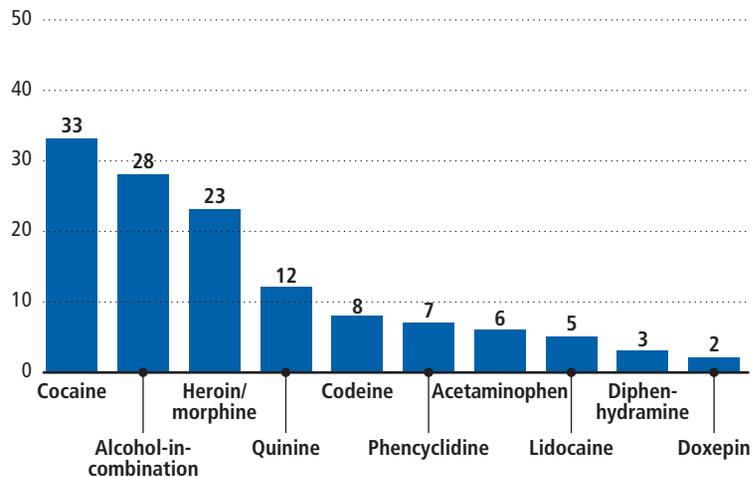
## Prince George's County, MD: Deaths and population, 2000

<b>Deaths involving drug abuse</b>	
Total	54
Drug-induced	34
Drug-related	20
<b>Total deaths certified</b> 890	
<b>Population (2000)</b> 801,515	

## Drug-related deaths by sex, age and race/ethnicity

Sex	Age	Race/Ethnicity
Male	6-17	White
Female	18-24	Black
	25-34	Hispanic
	35-44	All others
	45-97	

## Top 10 drugs mentioned



## Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
<b>Alcohol involved</b>	52%	56%	38%	—	50%	45%	50%	62%
<b>Number of drugs involved</b>								
Single-drug	15%	15%	15%	—	33%	18%	13%	8%
Multi-drug	85%	85%	85%	—	67%	82%	88%	92%
<b>Cause of death</b>								
Drug-induced	63%	61%	69%	—	33%	55%	75%	62%
Drug-related	37%	39%	31%	—	67%	45%	25%	38%
<b>Manner of death</b>								
Suicide	15%	15%	15%	—	33%	18%	8%	15%
Accidental/unexpected	19%	24%	—	—	50%	9%	13%	23%
All others	67%	61%	85%	—	17%	73%	79%	62%

## Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	18	20	28	24	28	—
Cocaine	29	24	39	15	33	4
Heroin/morphine	24	32	31	23	23	—
Marijuana	—	—	—	—	—	—
Amphetamines	—	—	—	—	—	—
Methamphetamine	—	—	—	1	—	—
Club drugs <sup>1</sup>	—	—	—	—	1	—
Hallucinogens <sup>2</sup>	6	2	3	2	7	3
Inhalants	—	—	—	—	—	—
Narcotic analgesics <sup>3</sup>	15	16	15	8	13	—
Other analgesics	8	6	4	5	6	1
Benzodiazepines	4	9	3	—	—	—
Antidepressants	18	16	8	10	8	—
All other substances <sup>3</sup>	62	45	47	31	28	—
<b>Total drug deaths</b>	<b>59</b>	<b>54</b>	<b>59</b>	<b>42</b>	<b>54</b>	<b>8</b>
<b>Total drug mentions</b>	<b>184</b>	<b>170</b>	<b>178</b>	<b>119</b>	<b>147</b>	<b>—</b>
<b>Total deaths certified</b>	<b>1,007</b>	<b>982</b>	<b>1,231</b>	<b>1,265</b>	<b>890</b>	<b>—</b>

<sup>1</sup> Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. <sup>2</sup> Includes PCP, LSD, and miscellaneous hallucinogens. <sup>3</sup> Not tabulated above.



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**APPENDIX A: DAWN MEDICAL EXAMINER REPORT FORM**



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## APPENDIX B: GLOSSARY OF TERMS

This glossary defines terms used by the Drug Abuse Warning Network (DAWN), in data collection activities, analyses and publications. DAWN collects data and publishes findings separately for emergency departments (EDs) and death investigation jurisdictions. As a result, there are a number of terms that are unique to each component of DAWN.

This Appendix is divided into three sections. The first section contains terms common to both the ED component and the mortality data component of DAWN. The second section focuses on terms specific to the DAWN ED system, while the third section focuses on terms specific to the mortality data system.

### Definitions of Terms Common to DAWN's ED and Mortality Components

**Drug abuse:** The nonmedical use of a substance for any of the following reasons: psychic effect, dependence, or suicide attempt/gesture. In DAWN, nonmedical use means:

- the use of prescription drugs in a manner inconsistent with accepted medical practice;
- the use of over-the-counter drugs contrary to approved labeling; or
- the use of any substance (e.g., heroin, marijuana, peyote, glue, aerosols) for psychic effect, dependence, or suicide.

**Drug category:** A generic grouping of substances reported to DAWN, based on the classification of generic drugs by Multum Information Services. Multum Information Services is a subsidiary of the Cerner Corporation and a developer of clinical drug information systems and a drug knowledge base. More information is available at <http://www.multum.com>. The DAWN system has accumulated a vocabulary of thousands of substance names that have been mentioned in incidents of abuse. This vocabulary is updated monthly by the inclusion of new abuse substances and, through receipt of identifying information, the reclassification of drugs. Occasionally, this reclassification may result in a drug being shifted to a different drug grouping. The DAWN drug groupings are periodically reviewed in order to reflect the most recent changes in pharmaceutical classifications and drug legislation. Occasional changes in drug classification should be taken into consideration when comparing drug data from this publication with other DAWN publications. These classifications may involve street names and brand names, which are sometimes used to identify a substance and its generic drug group. Individual drugs comprising the most commonly reported drug categories can be found in Tables 2.3 to 2.7 of *Emergency Department Trends from DAWN*.

Additional clarification is provided for the following drug categories:

- *Alcohol-in-combination* – DAWN does not gather data on alcohol used alone, only alcohol used concomitantly with another abused substance. Therefore, all alcohol mentions are combination mentions.
- *Club drugs* – During the 1990s, use of certain illicit drugs was linked to “raves” and dance clubs. These substances are commonly referred to as “club drugs.” When used in DAWN, the term “club drugs” includes Ketamine, flunitrazepam (Rohypnol), gamma-hydroxy butyrate (GHB, or its precursor, gamma butyrolactone

[GBL]), and methylenedioxyamphetamine (MDMA or Ecstasy). Although commonly used in the rave scene, methamphetamine and hallucinogens are classified separately from club drugs in DAWN.

- *Drug unknown* – “Drug unknown” may be recorded when drug abuse was known or suspected to have been involved, but the specific substance could not be determined.
- *Heroin and Heroin/morphine* – This is the only drug classified differently in the ED and mortality components of DAWN. In the ED publications, heroin is classified as a major substance of abuse, separate from morphine, which is classified as a narcotic analgesic under central nervous system (CNS) agents. In the mortality data publications, heroin and morphine are classified together in a single category. When heroin is ingested, it is metabolized to morphine, so that the toxicology testing commonly used in death investigations often does not distinguish between the two. Therefore, a mention of either substance is recorded as heroin/morphine. A case mentioning both heroin and morphine will be “de-duplicated” and counted as a single heroin/morphine mention.
- *Inhalants* – This category includes anesthetic gases and psychoactive nonpharmaceutical substances for which the documented route of administration was inhaled, sniffed, or snorted. Psychoactive nonpharmaceuticals fall into one of the following 3 categories: (1) volatile solvents-adhesives (model airplane glue, rubber cement, household glue), aerosols (spray paint, hairspray, air freshener, deodorant, fabric protector), solvents and gases (nail polish remover, paint thinner, correction fluid and thinner, toxic markers, pure toluene, cigar lighter fluid, gasoline, carburetor cleaner, octane booster), cleaning agents (dry cleaning fluid, spot remover, degreaser), food products (vegetable cooking spray, dessert topping spray such as whipped cream, whippets), and gases (butane, propane, helium); (2) nitrites-amyl nitrites (“poppers,” “snappers”) and butyl nitrites (“rush,” “locker room,” “bolt,” “climax,” “video head cleaner”); or (3) chlorofluorohydrocarbons (Freons). Anesthetic gases (e.g., nitrous oxide, ether, chloroform) are presumed to have been inhaled.
- *Major Substances of Abuse* – We use this term to refer to the most commonly abused drugs (e.g., alcohol-in-combination and cocaine) and those drugs that are typically referred to as “illicit.”
- *Other Substances of Abuse* – We use this term to refer to pharmaceutical agents not included in the Major Substances of Abuse.

**Drug mention:** This refers to a substance that was recorded (“mentioned”) in a DAWN case report. In addition to alcohol-in-combination, up to 4 substances (“mentions”) can be reported for each ED episode, and up to 6 substances can be reported for each drug abuse death. Therefore, the total number of drug mentions exceeds the total number of ED visits or deaths. Even when only one drug is mentioned, it should not be assumed that the substance was the sole and direct cause of the episode or death; allowances should be made for reportable drugs not mentioned or other contributory factors. (See also **Single-drug episode/death.**)

**Metropolitan area:** An area comprising a relatively large core city or cities and the adjacent geographic areas. Conceptually, these areas are integrated economic and social units with a large population nucleus. The current DAWN ED sample, which was redesigned in the 1980s, is based on the definitions of Metropolitan Statistical Areas (MSAs) and Primary Metropolitan Statistical Area (PMSAs) issued by the Office of Management and Budget (OMB) in 1983, with a few exceptions. Metropolitan areas represented in the DAWN mortality data system are consistent with those represented in the DAWN emergency department system, also with a few exceptions. Users of DAWN should note that the emergency department component provides estimates for each of the 21 metropolitan areas. However, in the mortality data component, only raw counts are provided, and in many instances less than 100% of the MSA is represented in those counts.

**Not otherwise specified (NOS):** Catch-all category for substances that are not specifically named in the listing. Terms are classified into an NOS category only when assignment to a more specific category is not possible based on information in the source documentation (ED patient charts and death investigation case files).

**Not tabulated above (NTA):** Designation used when categories are not presented in complete detail; smaller units are combined in the NTA category.

**Race/ethnicity:** Beginning in January 2000, the race and ethnicity categories collected on DAWN case report forms changed to match a change in the standard protocol issued by the Office of Management and Budget in 1997.<sup>9</sup> The new protocol permits separate reporting of race and Hispanic ethnicity; the ability to capture more than one race for an individual; modifications in nomenclature (e.g., “Black” was changed to “Black or African American”); division of certain categories (“Asian or Pacific Islander” was split into 2 categories, “Asian” and “Native Hawaiian or Other Pacific Islander”); and elimination of the “Other” category.

The race/ethnicity categories on the DAWN data collection forms are as follows:

### Race

- *White* – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- *Black or African American* – A person having origins in any of the black racial groups of Africa.
- *American Indian or Alaska Native* – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- *Asian* – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- *Native Hawaiian or Other Pacific Islander* – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- *Unknown* – Used when documentation of race is not available from source records.

### Ethnicity

- *Hispanic or Latino* – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- *Not Hispanic or Latino* – Ethnicity does not meet the definition of Hispanic or Latino.
- *Unknown* – Used when documentation of ethnicity is not available from source records.

Despite the increased detail allowed by the new categories, the actual race/ethnicity data reported to DAWN changed very little because race and ethnicity are often not documented with this level of specificity in patient/decedent records. As a result, we have retained the classification used previously to tabulate DAWN data. The one exception is that we now collapse the less commonly used categories into a category termed “Not tabulated above (NTA)” instead of “Other.” Categories used to tabulate race and ethnicity data in the ED publications are:

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<sup>9</sup> See Office of Management and Budget, *Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity*, Federal Register, 62 FR 58782, October 30, 1997.

- *White* – Anyone meeting the definition of white (above). Those who are identified as white and Hispanic are classified as Hispanic.
- *Black* – Anyone meeting the definition of black or African American (above). Those who are identified as black or African American and Hispanic are classified as Hispanic.
- *Hispanic* – Anyone whose ethnicity is Hispanic or Latino is placed in the category Hispanic, regardless of race.
- *Race/ethnicity not tabulated above (NTA)* – This includes those categories that are too small to report independently including: two or more races, American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander.
- *Unknown* – Race and ethnicity are unknown. Those who are identified only as Hispanic are classified as Hispanic.

In *Mortality Data from DAWN*, race/ethnicity data are tabulated as White, Black, Hispanic, and All others, where “All others” includes other reported races and ethnicities as well as unknown or missing data.

**Route of drug administration:** DAWN reporters are asked to record the method by which the substance was taken into the drug abuser’s body according to the following categories:

- *Oral* – Substance was ingested through the mouth (swallowed).
- *Injection* – Substance entered the body through a vein (intravenously), into the muscle (intramuscularly), or under the skin (subcutaneously).
- *Inhaled* – Gases or fumes of a substance were taken into the body by inhaling through the nose or mouth into the lungs (e.g., inhaling the fumes of glue, aerosols, paints, gasoline).
- *Smoked (includes freebase)* – Substance was consumed by smoking a cigarette, pipe, or similar device.
- *Sniffed/snorted* – Substance, acquired in a powder or crystalline form, was forcefully inhaled through the nose.
- *Other* – This category is used when the route of administration of the substance cannot logically be included as any of the above.

Readers should note that this information is often not documented in patient/decedent files and is therefore missing in DAWN tabulations. Caution should therefore be exercised in interpreting this information.

**Single-drug episode/death:** A single-drug episode or death is that in which only one drug was involved. Because multiple substances may be recorded for each DAWN case (see **Drug mention**), readers should exercise caution in interpreting the relationship between a given drug and the number of associated ED visits or deaths. For example, if records for a given patient “mentioned” marijuana, this does not mean that marijuana was the only drug involved in the ED visit or that the marijuana caused the ED visit. One should always consider whether and how many other drugs were used in combination, but even then attributing a causal relationship between the visit and a particular drug may not be possible. Additionally, because alcohol is only documented if used in combination with another drug, DAWN cannot provide single-drug episode/death totals for alcohol.

## Definitions of Terms for the DAWN ED Component

**Coterminous U.S.:** The contiguous 48 continental States and Washington, DC. Excludes Alaska and Hawaii. National estimates from DAWN refer only to the coterminous U.S.

**Disposition of ED patient:** Suggestions or recommendations made or actions taken by the hospital as they relate to the patient's presenting problem:

- *Treated and released or referred* – The patient was given appropriate ED treatment and was released or, after appropriate ED treatment, the hospital referred the patient to another agency or to a private physician for additional services.
- *Admitted to hospital* – The patient was admitted as an inpatient to a hospital.
- *Left against medical advice* – The patient left the treatment setting without a physician's approval.
- *Died* – The patient expired.

**Drug abuse episode:** A reported ED visit that involved drug abuse. Episodes involving patients under the age of 6 or over the age of 97 are not reported to the DAWN system. The number of ED patients in DAWN is not synonymous with the number of patients involved. One patient may make repeated visits to an ED or to several EDs, thus producing a number of episodes. It is impossible to determine the number of unique patients involved in the reported ED episodes because no patient identifiers are collected.

**Drug concomitance:** This term refers to whether a drug abuse episode involved a single drug (one mention) or multiple drugs (multiple mentions).

**Drug use motive:** DAWN classifies ED drug abuse episodes according to one or more of the following reasons for taking a substance(s):

- *Psychic effects* – A conscious action to use drugs to improve or enhance any physical, emotional, or social situation or condition. Two categories of psychic effect are:
  - Use of drugs for experimentation or to enhance a social situation (e.g., curiosity, peer pressure, "just wanted to know what it felt like," "wanted to have fun," "to get high," "for kicks," "to party"); and
  - Use of drugs to improve or enhance any mental, emotional, or physical state (e.g., depression, anxiety, to relieve headache, reduce pain, stay awake, lose weight, relax, help study, get to sleep). Referred to in DAWN as "other psychic effects."
- *Dependence* – A physiological or psychological condition characterized by a compulsion to take the drug on a continuous or periodic basis in order to experience its effects or to avoid the discomfort of its absence (e.g., had to take, had to have, needed a fix).
- *Suicide attempt or gesture* – Successful or unsuccessful action(s) taken for the purpose of self destruction or to gain attention.
- *Other reason* – Used when the reason for taking the substance cannot be classified into the categories above.

**Estimate:** A statistical estimate is the value of a parameter (such as the number of drug-related ED episodes) for the universe that is derived by applying sampling weights to data from a sample. DAWN produces representative statistical estimates for 21 metropolitan areas based on data from a sample of EDs in each of the 21 areas. An estimate for the coterminous U.S. is produced by summing estimates for the 21 metropolitan areas and an estimate for the National Panel.

**Form in which drug was acquired:** The form in which the substance was received by the user/abuser, not the form in which the substance was consumed. Categories are: tablet/capsule/pill, aerosol, liquid, powder/crystal, paper,

pieces/chunks, injectable liquid, cigarette, plant material, unknown, and other. Readers should note that this information is often not documented in ED records and is therefore missing in DAWN tabulations. Caution should therefore be exercised in interpreting this information.

**Hospital emergency department (ED):** Only hospitals that meet eligibility criteria for DAWN are recruited to participate. To be eligible, hospitals must be non-Federal, short-stay, general medical and surgical facilities with EDs that are open 24 hours a day, 7 days a week, and located in the coterminous U.S. Specialty hospitals; hospital units of institutions; long-term care facilities; pediatric hospitals; hospitals operating part-time emergency departments; hospitals in Alaska and Hawaii; and hospitals operated by the Veterans Health Administration and the Indian Health Service are excluded.

**National Panel:** This term is used to denote 2 concepts relative to DAWN ED data: (1) The universe of eligible hospitals outside the 21 DAWN metropolitan areas but within the coterminous U.S. and (2) The sample of hospitals in DAWN that were selected from this universe. The National Panel sample is weighted to produce estimates for the National Panel universe. (See also **Metropolitan area**.)

**p-value:** The probability value is the actual probability associated with a statistical estimate; this is then compared with the significance level to determine whether that value is statistically significant. For a statistically significant result, the p-value must be less than or equal to the significance level. The traditional significance levels are  $p$  less than 0.001, 0.01, 0.05, and 0.10. A result with a p-value less than 0.05 is considered statistically significant in DAWN ED publications.

**Population:** See **Universe**.

**Precision:** The extent to which an estimate agrees with its mean value in repeated sampling. The precision of an estimate is measured inversely by its standard error (SE) or relative standard error (RSE). In DAWN publications, estimates with an RSE of 50 percent or higher are regarded as too imprecise to be published. ED table cells where such estimates would have appeared contain the symbol "... " (3 dots). (See also **Relative standard error**.)

**Rank:** A rank indicates the relative frequency of a measure, such as mentions for a particular drug category. For example, a drug category ranked second indicates that it accounted for the second highest number of mentions among all drug categories. When 2 or more drugs receive equal numbers of mentions, they are assigned the same rank. A difference in rank should be considered only as indicative of a difference in frequency among drugs reported to DAWN, regardless of the size of the difference. Such differences are not necessarily meaningful or statistically significant.

**Reason for present ED contact:** The reason for the patient's visit to the ED, based on documentation provided in the medical record. Categories are:

- *Overdose/toxic ingestion* – Either intentional or accidental (e.g., effects of suicide attempt, coma). Anyone whose reason for contact is overdose is placed in this category, regardless of other reasons.
- *Unexpected reaction* – The drug's effect was different than anticipated, thus causing concern (e.g., bad trip, panic, hallucinations).

- *Withdrawal* – Symptoms which occur when a patient stops taking a substance upon which she/he is physiologically dependent and suffers physical symptoms, including abdominal pain, cold sweat, hyperactivity, and tremors that require treatment.
- *Chronic effects* – Secondary conditions resulting from habitual use or dependence, including malnutrition, tetanus, blood poisoning, and so forth.
- *Seeking detoxification* – Patients with identified problems with chronic substance abuse who seek admission to a detoxification program and receive treatment from emergency department staff. This category was added to the data collection form in 1987. Some hospitals require patients to be processed in the ED prior to admission for detoxification. Caution should therefore be exercised in interpretation of this category and the remaining information.
- *Accident/injury* – Injuries resulting from accidents that were caused by or related to drug abuse. This category was added to the data collection form in 1987.
- *Other* – Reasons which cannot be classified into one of the aforementioned categories.

**Reason for taking substance:** See **Drug use motive**.

**Relative standard error (RSE):** A measure of the sampling variability or precision of an estimate defined as the estimate's standard error (SE) expressed as a percentage of the estimate's value. For example, an estimate of 2,000 cocaine mentions with an SE of 200 mentions has an RSE of 10 percent. (See also **Precision** and **Standard error**.)

**Sampling:** Sampling is the process of selecting a proper subset of elements from the full population so that the subset can be used to make inference to the population as a whole. A probability sample is one in which each element has a known and positive chance (probability) of selection. A simple random sample is one in which each member has the same chance of selection. In DAWN, a sample of hospitals is selected in order to make inference to all hospitals; DAWN uses simple random sampling within strata.

**Sampling frame:** A list of units from which the ED sample is drawn. All members of the sampling frame have a probability of being selected. A sampling frame is constructed such that there is no duplication and each unit is identifiable. Ideally, the sampling frame and the universe are the same. The sampling frame for the DAWN hospital ED sample is derived from the American Hospital Association (AHA) Annual Survey of Hospitals.

**Sampling unit:** A member of a sample selected from a sampling frame. For the DAWN sample, the units are hospitals, and data are collected for all drug-related ED episodes at the responding hospitals selected for the sample.

**Sampling weights:** Numeric coefficients used to derive population estimates from a sample.

**Source of substance:** The immediate source of the substance that the patient abused is coded as follows:

- *Patient's own legal prescription* – This is coded only when the abuser was legally prescribed the drug of abuse. If one patient obtains a drug by legal prescription and sells it to another who abuses it, the source to the abuser is marked "street buy." If the patient for whom the prescription was issued gives the drug to another patient who abuses it, the source to the abuse is "other unauthorized procurement."
- *Street buy* – The drug abuser purchased a drug and/or prescription from a source other than legitimate channels.

- *Other unauthorized procurement* – The drug was acquired in a manner not consistent with accepted medical care but was not bought on the street. This category includes drugs purchased using forged prescriptions, stolen, or received as a gift.
- *Other* – Used when the source of the substance cannot logically be included as any of the above. This category includes all over-the-counter medications.
- *Unknown* – Reported when information on source was unavailable.

Readers should note that this information is often not documented in ED records and is therefore missing in DAWN tabulations. Caution should therefore be exercised in interpreting this information.

**Standard error (SE):** A measure of the sampling variability or precision of an estimate. The SE of an estimate is expressed in the same units as the estimate itself. For example, an estimate of 10,000 cocaine mentions with an SE of 500 indicates that the SE is 500 mentions.

**Strata (plural), stratum (singular):** Subgroups of a population within which separate ED samples are drawn. Stratification is used to increase the precision of estimates for a given sample size, or, conversely, to reduce the sample size required to achieve the desired level of precision. The DAWN ED sample is stratified into 21 metropolitan area cells plus an additional cell for the National Panel. Then, within these cells strata are defined according to the annual number of ED visits, whether the hospital is located inside or outside the central city of the metropolitan area, and by the presence or absence of an organized outpatient department, alcohol/chemical dependence inpatient unit, or both. The strata are as follows:

Stratum	Annual ED visits	Location within metropolitan area	Outpatient department or alcohol/chemical dependence inpatient unit
<b>In the 21 DAWN metropolitan areas:</b>			
0	>80,000	Not applicable	Not applicable
1	<80,000	Central city	Both
2	<80,000	Central city	One only
3	<80,000	Central city	Neither
4	<80,000	Outside Central city	Both
5	<80,000	Outside Central city	One only
6	<80,000	Outside Central city	Neither
<b>In the National Panel:</b>			
0	>80,000	Not applicable	Not applicable
7	<80,000	Not applicable	Both
8	<80,000	Not applicable	One only
9	<80,000	Not applicable	Neither

Note: Stratum "0" is defined for each of the 21 metropolitan areas and the National Panel cells. See *Drug Abuse Warning Network Sample Design and Estimation Procedures: Technical Report*, November 1997.

**Statistically significant:** A difference between 2 estimates is said to be statistically significant if the value of the statistic used to test the difference is larger or smaller than would be expected by chance alone. For DAWN ED estimates, a difference is considered statistically significant if the p-value is less than 0.05. (See also **p-value**.)

**Universe:** The entire set of units for which generalizations are drawn. The universe for the DAWN ED sample is all non-Federal, short-stay, general medical and surgical hospitals in the coterminous U.S. with EDs open 24 hours a day, 7 days a week. (See also **Coterminous U.S.**).

## Definitions of Terms for the DAWN Mortality Component

**Cause of death:** Cases are reportable to DAWN if the death investigation concludes that the death was either directly or indirectly caused by drug abuse. If a death was directly caused by drug abuse (e.g., a drug overdose), DAWN refers to the death as **drug-induced**. If drug abuse was a contributing factor in the death, but not the immediate or sole cause, then DAWN refers to the death as **drug-related**. It is important to note that DAWN data include both types of deaths. It is also important to note that a drug-induced death may involve more than a single drug. (See **single-drug episode**.)

**Certified death:** Any case accepted and reviewed by a medical examiner or coroner, who uses information from the death investigation to complete the death certificate.

**Consistent panel:** DAWN does not impute missing data for jurisdictions that have not reported for all or part of a given year. Therefore, tables and charts showing trends in deaths over time are based on a consistent panel of reporting jurisdictions. A consistent panel includes those jurisdictions that have reported data for at least 10 months of each year reflected in the trend table/chart. The reason for a consistent panel is to ensure that apparent changes over time are not a result of gaps in reporting. Because participating jurisdictions may change from year to year, consistent panels used in published reports will also change from year to year. This means that trends published in one annual report are not necessarily comparable to trends published in subsequent annual reports.

**Coroner:** Death investigation jurisdictions typically use either a medical examiner system or a coroner system. Unlike medical examiners, coroners need not be physicians; usually the only prerequisite for serving as a coroner is that the individual be more than 18 years of age and a resident of the county or district to be served. Coroners are typically elected rather than appointed. They may have jurisdiction over counties or districts within states. (See also **Jurisdiction** and **Medical examiner**.)

**Drug combinations:** Published tables from the DAWN mortality data refer to “drug combinations” rather than “drug concomitance” (the term used in the ED component). This term refers to multiple drug mentions for a single death, and tables show particular combinations of substances reported for deaths. Readers should note that DAWN cannot differentiate between drugs actually used in combination (simultaneously) and drugs used sequentially.

**Drug-induced death:** A death directly resulting from drug abuse or other substance abuse, such as drug overdoses or the interactive effects of drug combinations. When more than one drug is mentioned, it cannot be determined which or whether one drug was the sole and direct cause of the episode or death.

**Drug-related death:** A death in which the abuse of a drug is a contributing factor, but is not the sole cause of death. Such cases include drug abuse that exacerbates a pre-existing physiological condition; drug abuse in combination with an external physical event (e.g., a fall or automobile accident); or a medical disorder that was itself caused by drug abuse (e.g., hepatitis contracted through injection drug use). Drug-related deaths are classified into two types, confirmed and presumed. The drug-relatedness is “confirmed” if documentation in the decedent’s file substantiates that conclusion. The drug-relatedness is “presumed” if the investigation suggests drug involvement, but the medical examiner/coroner has insufficient evidence to list drug abuse as a contributing cause on the death certificate. Both confirmed and presumed deaths are included in the published mortality data tables.

**Jurisdiction:** DAWN uses the term “jurisdiction” to mean the geographic area for which a medical examiner/coroner’s office is responsible. In many states, there is a 1:1 correspondence between jurisdictions and counties. In some states, there are multiple medical examiner/coroner offices within a given county, or there may be multiple counties covered by a “district” that includes one or more medical examiners/coroners. A few states are organized as a single statewide jurisdiction.

Understanding jurisdictions is important because this assists readers in interpreting aggregated data. Published DAWN mortality data are aggregated into metropolitan areas, which often comprise multiple jurisdictions. In some states, there are different death investigation procedures for different jurisdictions (most notably, some jurisdictions have medical examiner systems, while others have coroner systems). There are nearly always some differences in death investigation procedures across states (and notably, some metropolitan areas include jurisdictions in multiple states). Readers should be mindful of these variations when interpreting or comparing data.

Information on death investigation practices and an updated list of jurisdictions throughout the U.S. and Canada are available from the Centers for Disease Control’s Epidemiological Program Office at [www.cdc.gov/epo/dphsi/mecisp/death\\_investigation.htm](http://www.cdc.gov/epo/dphsi/mecisp/death_investigation.htm).

**Manner of death:** This variable is used to describe how the decedent died. It is applicable to both drug-induced and drug-related deaths. On the DAWN data collection form, manner of death is coded into the following categories:

- *Accidental/Unexpected* – Although the drug abuse was deliberate, the resulting death was unintended.
- *Suicide* – Death in which there is evidence that the decedent deliberately used drugs to bring about his/her demise.
- *Homicide* – Death in which the decedent’s life was taken by another individual by means of drugs. These cases, which do not involve the intentional abuse of drugs by the decedent, are not currently included in published tabulations of DAWN mortality data.
- *Natural* – Death was due to natural causes such as a medical disorder or disease process, if drug abuse caused or worsened the decedent’s condition.
- *Undetermined* – The manner of death cannot be determined from all available evidence.

In *Mortality Data from DAWN*, manner of death is collapsed into three categories: suicide, accidental/unexpected, and “All others.” The “All others” category includes cases for which manner of death was recorded as natural, unknown, or undetermined, and cases for which manner of death was missing.

**Medical Examiner (ME):** Death investigation jurisdictions typically use either a medical examiner system or a coroner system. Most medical examiners are licensed physicians or forensic pathologists, and are generally appointed (rather than elected). They may have jurisdiction over a county, district, or entire state. (See also **Coroner** and **Jurisdiction**.)