A Deadly Mix: Fentanyl and Cocaine Mortality in Connecticut, 2012-2018

Jen Wogen, Jennifer Sussman, Janice Vendetti, Jane Ungemack

CPHA'S 2019 Annual Conference
Innovative Solutions to Public Health Challenges: Research, Programs, and Policy
Breakout Session 3B: Rapid Fire
October 21, 2019
Figure 1. Number of Overdose Deaths by Year: CT, 2012-2018

Data Source: Office of the Chief Medical Examiner (https://portal.ct.gov/OCME/Statistics)
Number of Cocaine-Involved Overdose Deaths Overall, with Any Opioid, and with Fentanyl: CT, 2012-2018

Emergence of fentanyl-involved overdose
Fentanyl- and Cocaine-Involved Mortality by 5CT Community Type¹: CT, 2012-2018

1CT was developed in 2004 (updated in 2014) by the Connecticut State Data Center as a means of disaggregating Connecticut’s census data (2010 census data). Based on criteria of each town (using decedent town of residence): Median household income, Population density, Poverty rate.
Other Substances Involved in Fentanyl- and Cocaine-Involved Overdose Deaths: CT, 2018

Fentanyl-Involved Deaths, 2018 (n=760)

- Fentanyl Only: 20%
- Heroin: 40%
- Cocaine: 35%
- Prescription opioids: 9%
- Methadone: 6%
- Benzodiazepines: 24%
- Alcohol: 24%

Cocaine-Involved Deaths, 2018 (n=345)

- Cocaine Only: 8%
- Fentanyl: 78%
- Heroin: 39%
- Prescription opioids: 7%
- Methadone: 6%
- Benzodiazepines: 23%
- Alcohol: 21%

Prescription opioids include oxycodone, oxymorphone, hydrocodone, hydromorphone, tramadol.
Summary

• While overdose mortality in Connecticut is now driven by fentanyl, cocaine is becoming more common among overdose deaths
• More than 3 in 4 cocaine-involved deaths in 2018 involved fentanyl
• Although fentanyl and cocaine-involved overdose mortality has increased among all community types since 2012, urban core communities have experienced the highest rates and the greatest increases
• Public health strategies to address overdose mortality must consider the role of polysubstance use and fentanyl’s infiltration into the illicit drug market across the state’s communities, and in urban core communities particularly
Thank you!

Jen Wogen, MS
wogen@uchc.edu

Additional data is available on the SEOW Prevention Data Portal:
http://preventionportal.ctdata.org/