

Drug Overdose Quarterly Report Quarter 3: July–September 2024



County of San Diego Health and Human Services Agency
Public Health Services
Epidemiology and Immunization Services Branch

www.sdepi.org

November 2024



Data is provisional and subject to change.

Epidemiology and Immunization Services Branch

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Overdose Surveillance and Response Program



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Overdose Surveillance and Response Program



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Drug Overdose Surveillance Report

Introduction and Sources

This report provides an overview of statistics regarding fatal and non-fatal drug overdoses in San Diego County. Each quarterly report will include a standard set of figures, updated to the most recent calendar year quarter available (Pages 2-8). In addition, a different specific topic will be featured each quarter. The 'featured topic' for this report is on drug overdoses among persons experiencing homelessness (Pages 9-18).

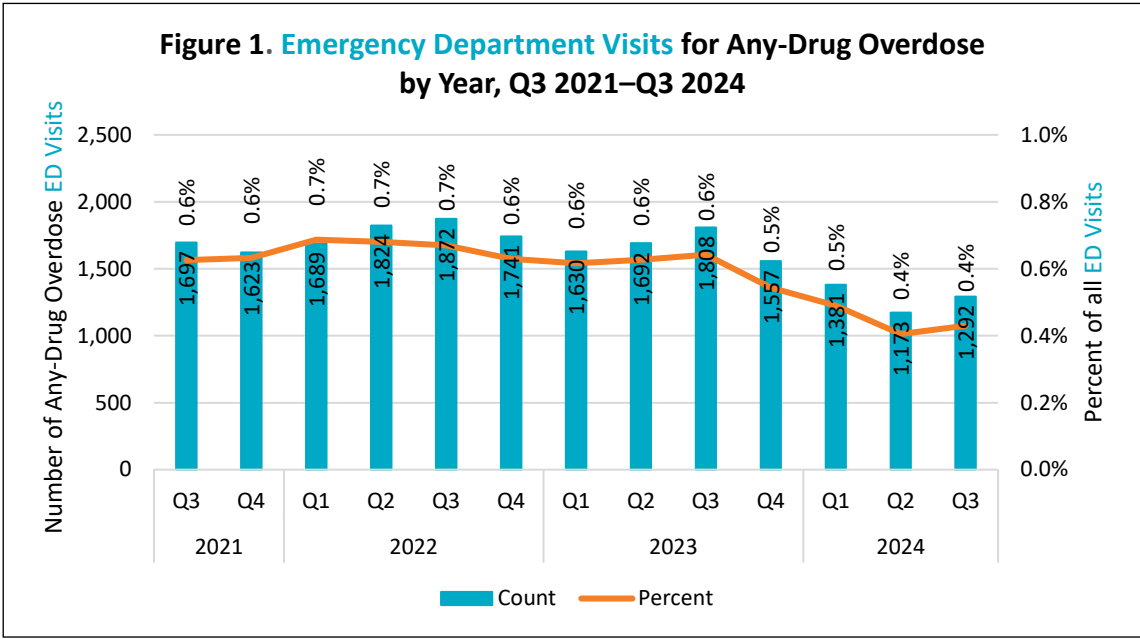
Primary data sources included in this report are:

- County of San Diego (County) Emergency Department (ED) Syndromic Surveillance includes chief complaint and some discharge data received daily from 18 of 19 civilian EDs in San Diego County.
 - Unless otherwise noted, the ED data presented in the report are syndromic surveillance data.
 - ICD-10 codes for drug and/or overdose terms are not often available; therefore, word search queries are also used. Word search queries are reviewed and updated periodically; data may change to reflect these updates.
 - Syndromic data provide a more timely, though less complete, look at trends than the final ED data from [California Department of Health Care Access and Information \(HCAI\)](#).
- Mortality data are from the [Vital Records Business Intelligence System \(VRBIS\)](#), which is managed by the California Department of Public Health.
 - Deaths during the year 2024 are preliminary and subject to change. Data from the most recent quarters are too incomplete to present.
 - Unless otherwise noted, deaths are among San Diego County residents only.
- [San Diego Association of Governments \(SANDAG\)](#) 2022 population estimates, vintage 2023 are used for calculating rates.

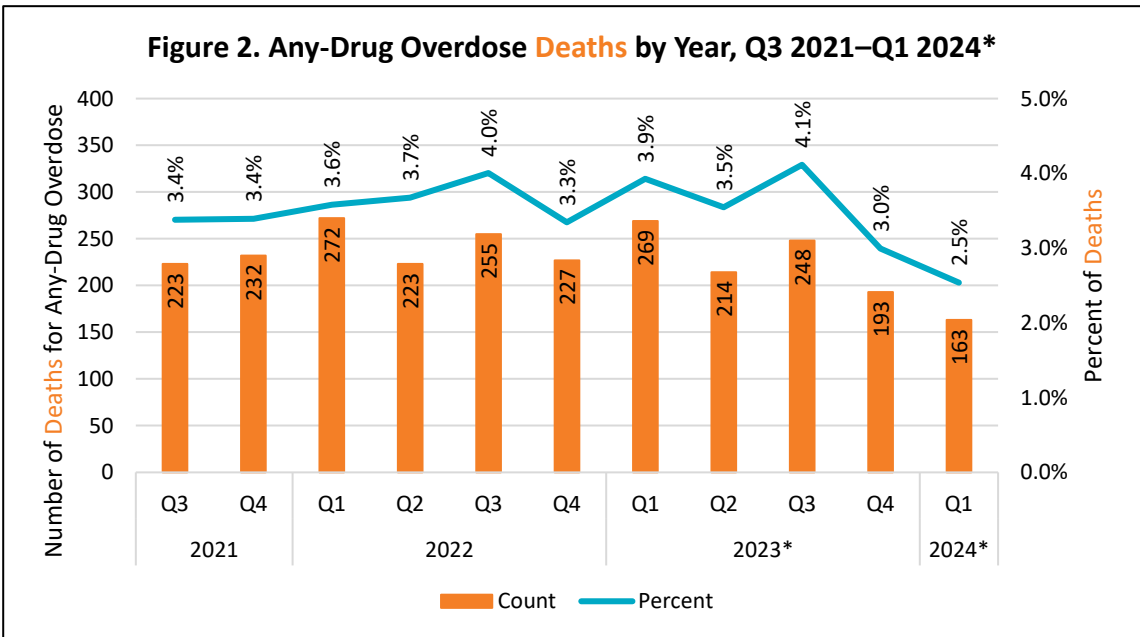
Overview

- The number of any-drug overdose and opioid overdose ED visits each decreased by 24% from Q3 2021 to Q3 2024, while the proportion of opioid overdose visits increased by 12%. Fentanyl attributed to 27% of the opioid overdose ED visits, an increase of 17% from Q3 2021 to Q3 2024 (Figure 3).
- Preliminary data for Q1 2024 suggests 66% of overdose deaths were opioid-related and 90% of opioid-related deaths were attributed to fentanyl (Figure 4).
- In Q3 2024, the rate of opioid overdose ED visits were 3.1 times higher among males compared to females (Figure 5); in Q1 2024, opioid overdose death rates were 4.9 times higher among males compared to females (Figure 6).
- The rates for opioid overdose ED visits are highest among those aged 25-34. However, the rate of opioid overdose ED visits decreased by 40% from Q3 2023 to Q3 2024 for this age group (Figure 7).
- Opioid overdose ED visit rates were highest among residents in the Health and Human Services Agency (HHS) Central Region (54.6 AAR) in Q3 2024 (Figure 11). Opioid overdose death rates were highest among residents in the HHS Central Region (19.9 AAR) in Q1 2024 (Figure 12).

Drug Overdoses by Year and Quarter



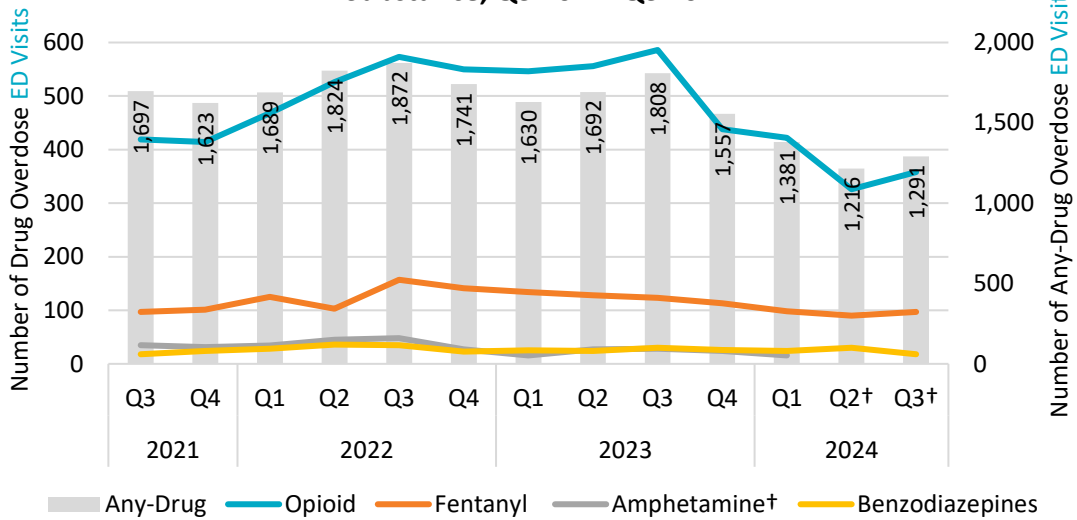
County of San Diego ED Syndromic Surveillance Data.



*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/14/2024.

Drug Overdoses by Substance

Figure 3. Drug Overdose Emergency Department Visits by Substance, Q3 2021–Q3 2024

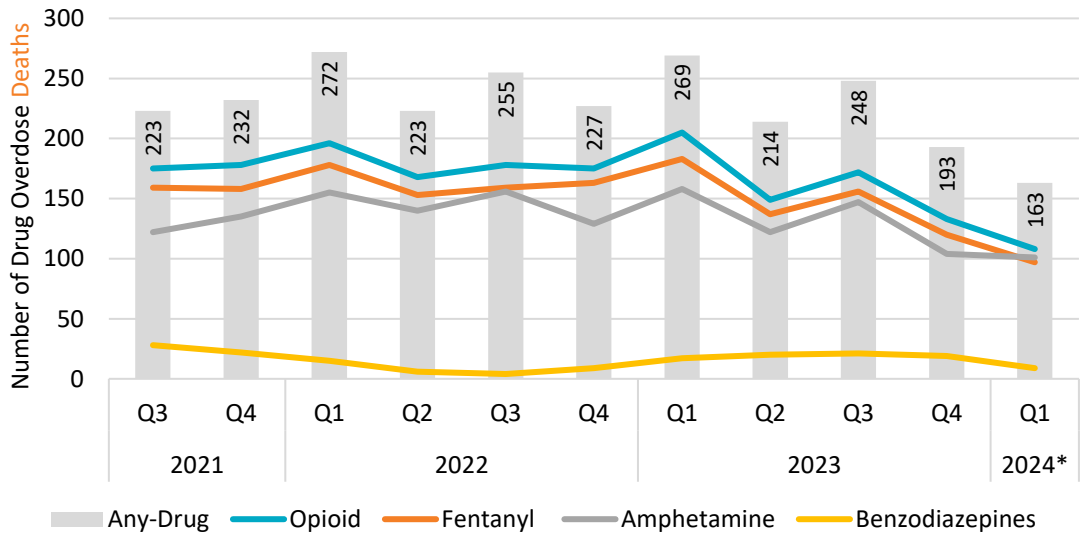


†Data for Amphetamine not presented for Q2 2024 and Q3 due to counts <11.

Notes: Many chief complaints do not include a specific drug. Drug categories are not mutually exclusive. For example, both opioids and amphetamine may have contributed to the same ED visit and these data do not show relative contributions of each. Fentanyl is also included in the opioid category.

County of San Diego ED Syndromic Surveillance Data.

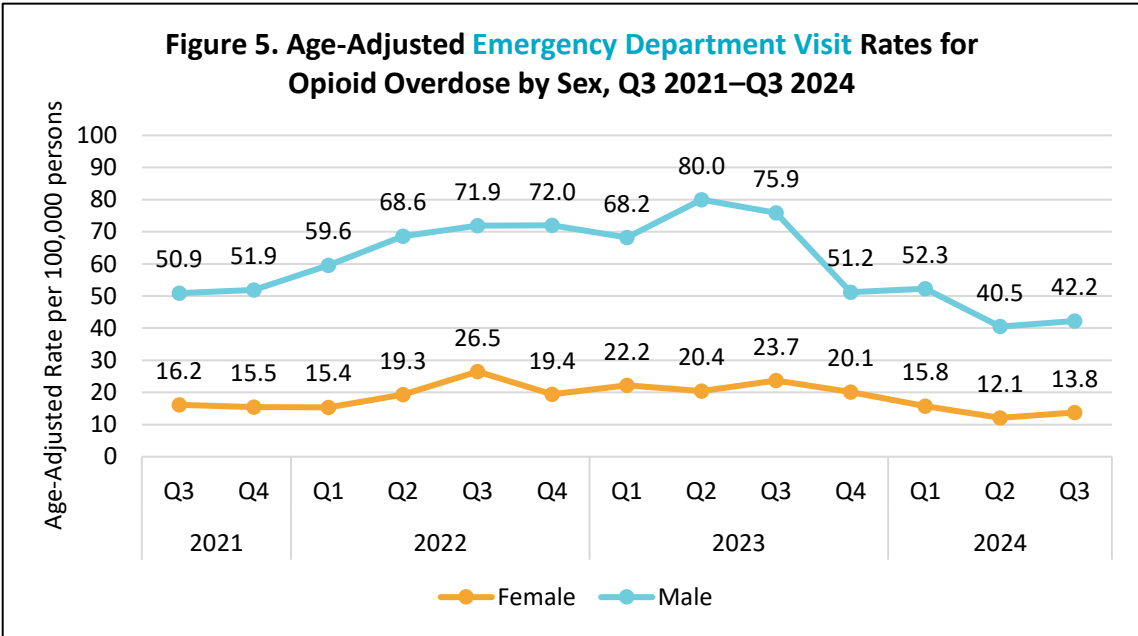
Figure 4. Drug Overdose Deaths by Substance, Q3 2021–Q1 2024*



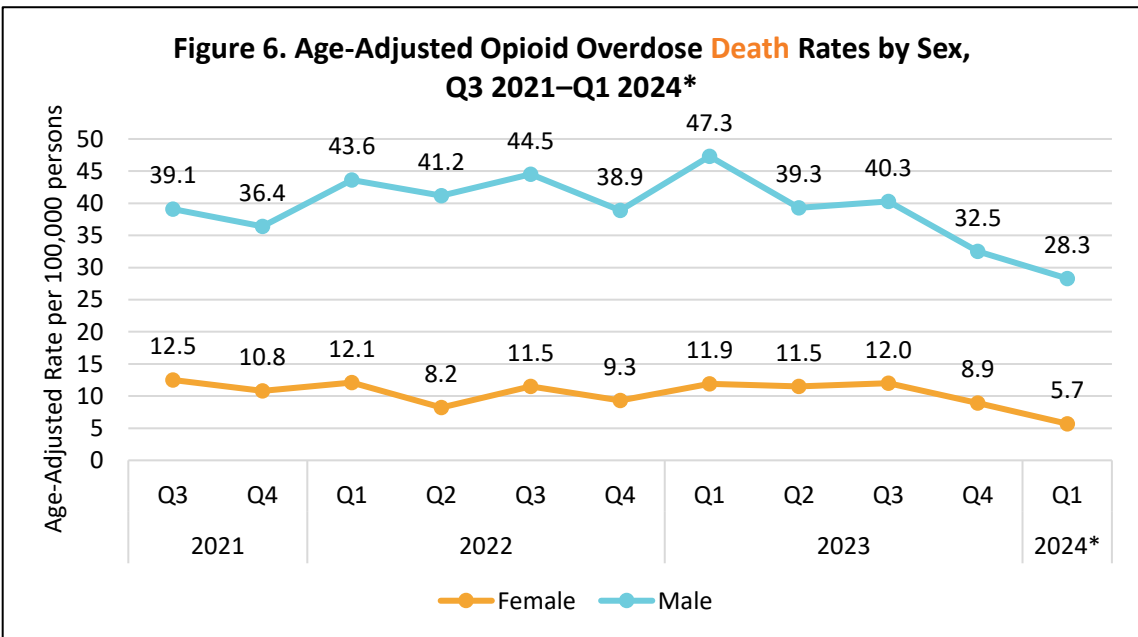
*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/14/2024.

Notes: Drug categories are not mutually exclusive. For example, both opioids and amphetamine may have contributed to the same death and these data do not show relative contributions of each. Fentanyl is also included in the opioid category.

Opioid Overdoses by Sex

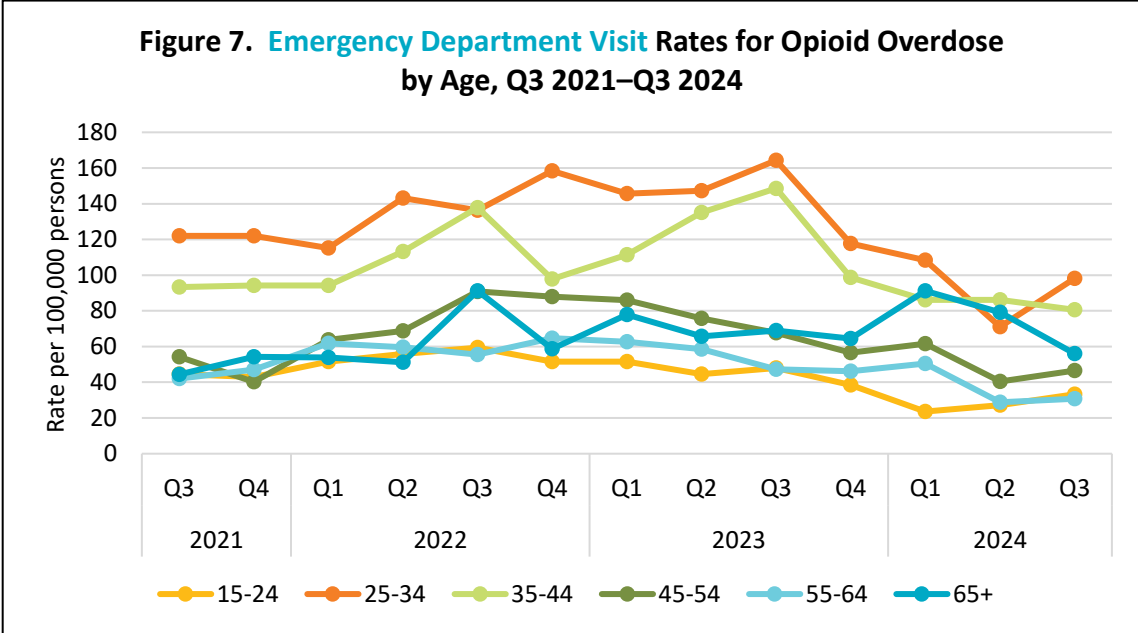


County of San Diego ED Syndromic Surveillance Data.

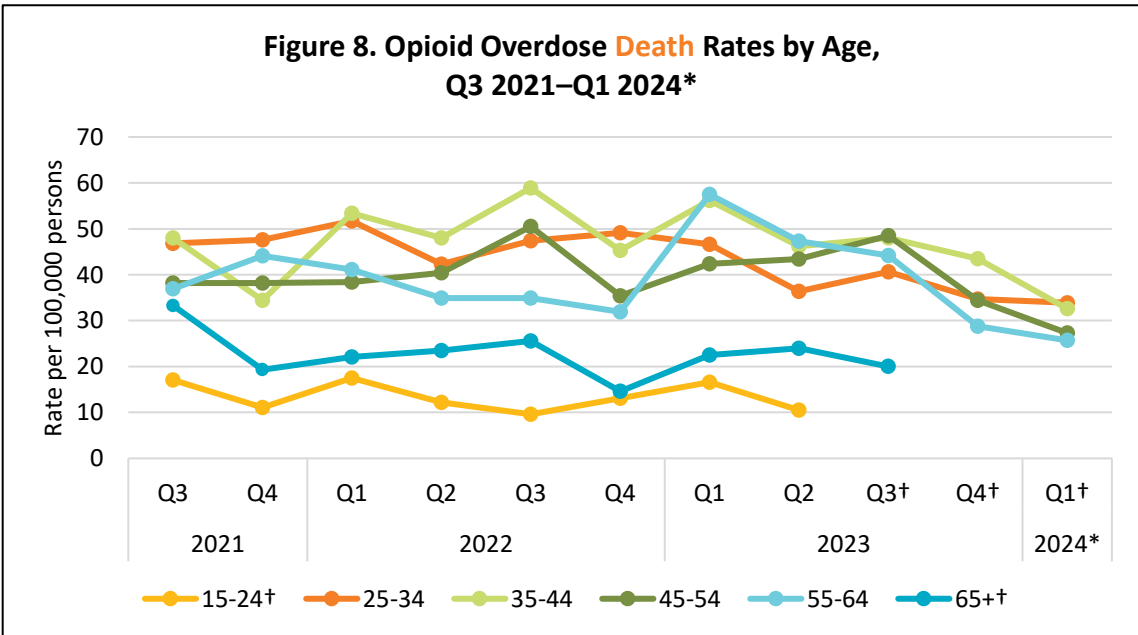


*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/14/2024.

Opioid Overdoses by Age

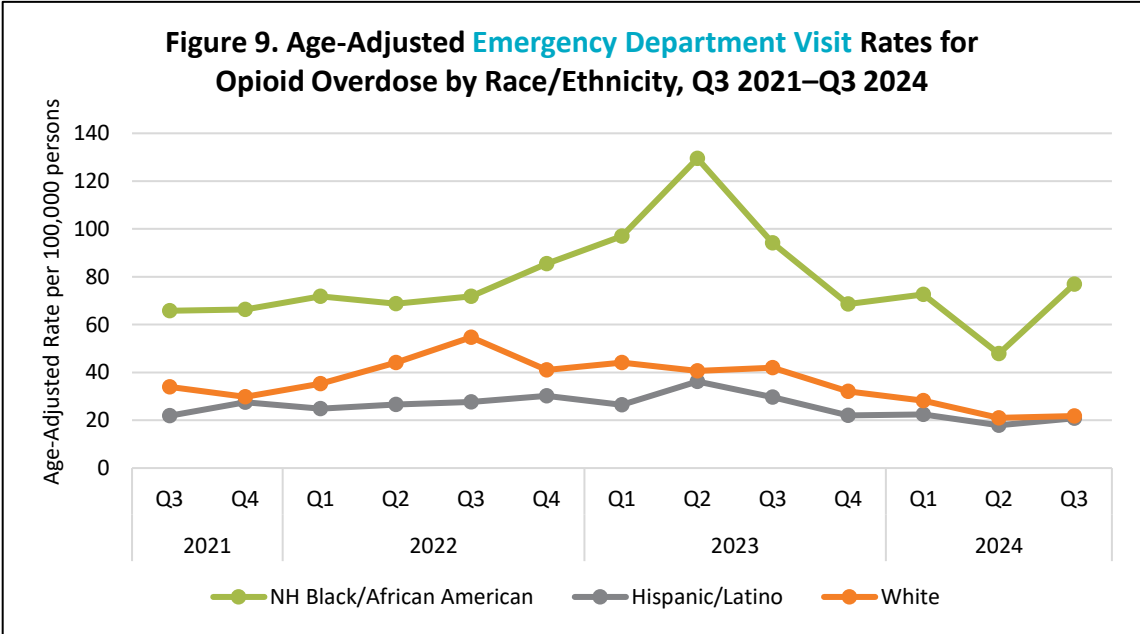


Notes: Data <15 age group cannot be presented due to small numbers (<11).
County of San Diego ED Syndromic Surveillance Data.

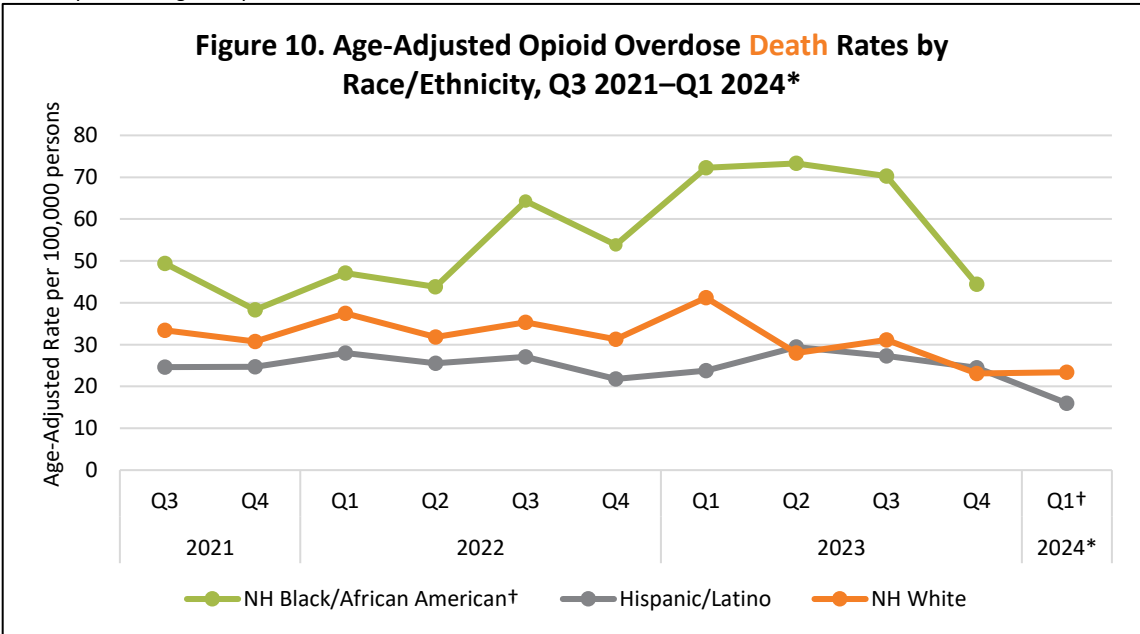


*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/14/2024.
†Data for 15-24 age group not presented for Q3 2023, Q4 2023 and Q1 2024 due to counts <11. Data for 65+ age group not presented for Q4 2023 and Q1 2024 due to counts <11.
Notes: Data <15 age group cannot be presented due to small numbers (<11).

Opioid Overdoses by Race/Ethnicity



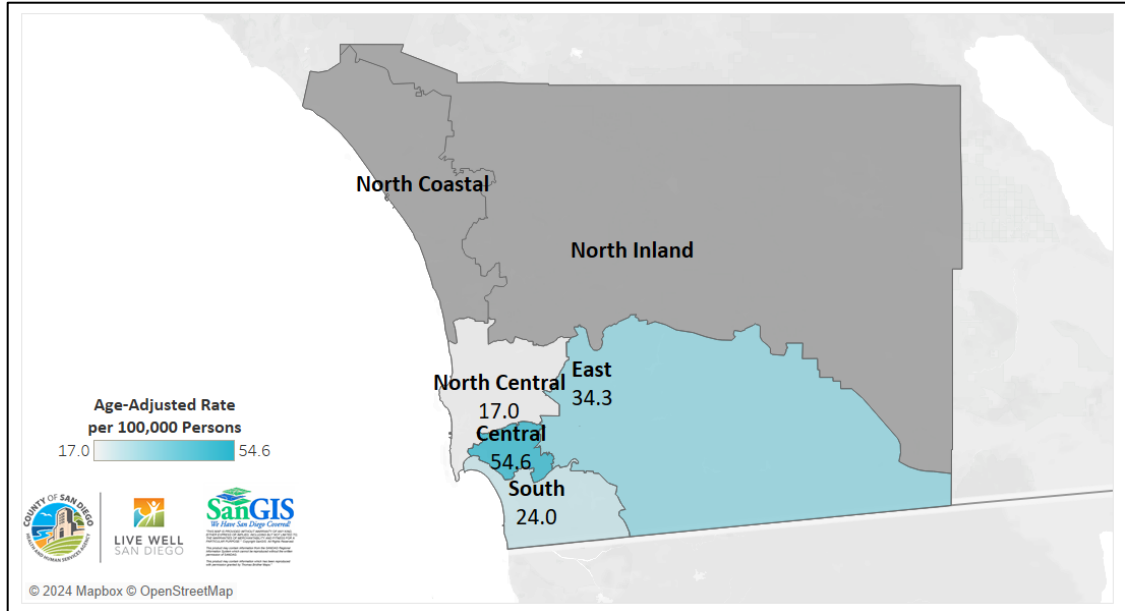
Notes: Data for other racial/ethnicity groups cannot be presented due to small numbers (<11). Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown. County of San Diego ED Syndromic Surveillance Data.



*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/14/2024. †Data for NH Black/African American not presented for Q1 2024 due to counts <11. Notes: Data for other racial/ethnicity groups cannot be presented due to small numbers (<11). Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown.

Opium Overdoses by Region of Residence

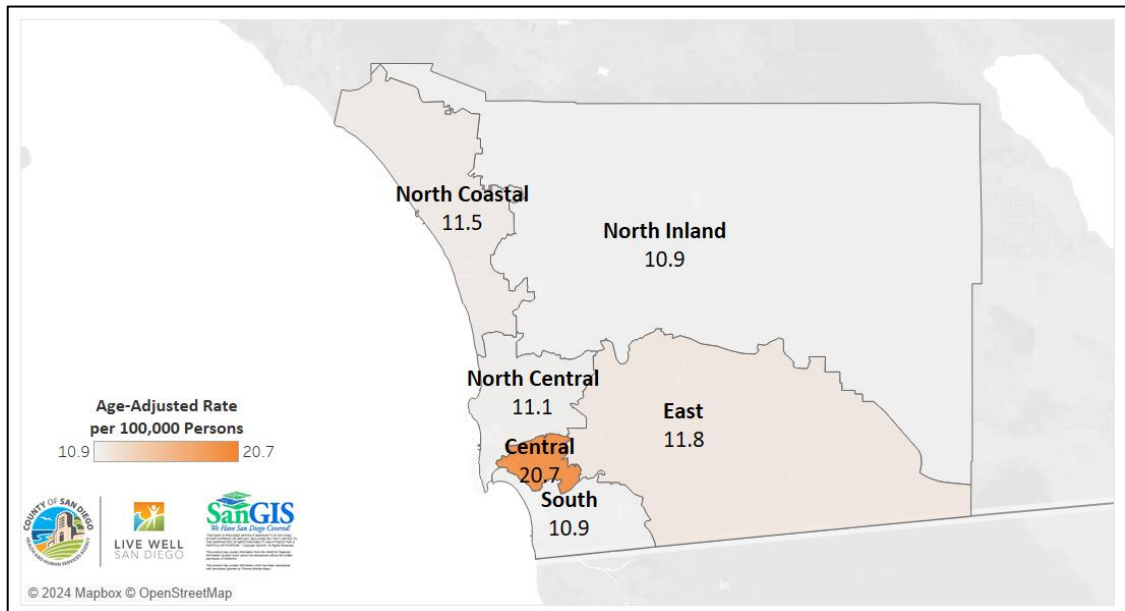
Figure 11. Age-Adjusted Emergency Department Visit Rates for Opioid Overdose by Region of Residence, Q3 2024



County of San Diego ED Syndromic Surveillance Data.

Notes: Data for North Coastal and North Inland regions of residence cannot be presented due to small numbers (<11).

Figure 12. Age-Adjusted Opioid Overdose Death Rates by Region of Residence, Q1 2024*



*Data from 2024 are preliminary and may change as new/updated information is received. Data obtained on 10/15/2024.

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Opioid Overdoses by Demographics

Table 1. Number of Emergency Department Visits* for Opioid Overdose, Trends and Change by Quarter

	2022 Q3	2023 Q3	2024 Q3	Percent Change 2023 to 2024
	N (%)	N (%)	N (%)	%
Total Opioid Overdose Visits	573 (100)	586 (100)	358 (100)	-39%
HHS Region of Residence				
North Coastal	25 (7)	22 (7)	†	†
North Central	71 (18)	83 (24)	30 (16)	-64%
Central	104 (27)	93 (27)	73 (38)	-22%
South	44 (11)	37 (11)	30 (16)	-19%
East	79 (21)	63 (19)	39 (21)	-38%
North Inland	62 (16)	42 (12)	†	†
Unknown	188	246	168	
Sex				
Female	108 (26)	98 (23)	60 (25)	-39%
Male	300 (74)	327 (77)	177 (75)	-46%
Unknown	165	161	121	
Age Group				
<15	†	†	†	†
15-24	68 (12)	55 (10)	38 (11)	-31%
25-34	161 (28)	194 (35)	116 (33)	-40%
35-44	152 (27)	164 (29)	89 (25)	-46%
45-54	90 (16)	67 (12)	46 (13)	-31%
55-64	54 (10)	46 (8)	30 (9)	-35%
65+	40 (7)	35 (6)	31 (9)	-11%
Unknown	†	†	†	
Race/Ethnicity				
NH Black/African American	28 (10)	37 (14)	30 (19)	-19%
Hispanic**	78 (27)	87 (33)	58 (36)	-33%
NH White	182 (63)	140 (53)	71 (45)	-49%
Unknown	248	276	173	

*County of San Diego ED Syndromic Surveillance Data.

†Data for other demographic groups cannot be presented due to small numbers (<11).

**Notes: Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown.

Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness

Introduction and Sources

Drug overdoses and homelessness are critical public health issues, and the high rate of overdoses among homeless populations poses an especially urgent challenge. During the 2024 Point-in-Time count in San Diego County there was a reported 10,605 persons experiencing homelessness (PEH).¹ In 2019, California reported 5,885 drug overdose deaths, 16% of which were among PEH. This proportion is likely an underestimate, as the homeless status was unknown for 17.5% of overdose deaths.²

This feature topic presents trends in fatal and non-fatal drug overdoses among PEH in San Diego County using [VRBIS](#) and [HCAI](#) data from 2022-2023 and 2019-2023, respectively. Due to small counts and population sizes, the data for some race/ethnicity groups should be interpreted with caution.

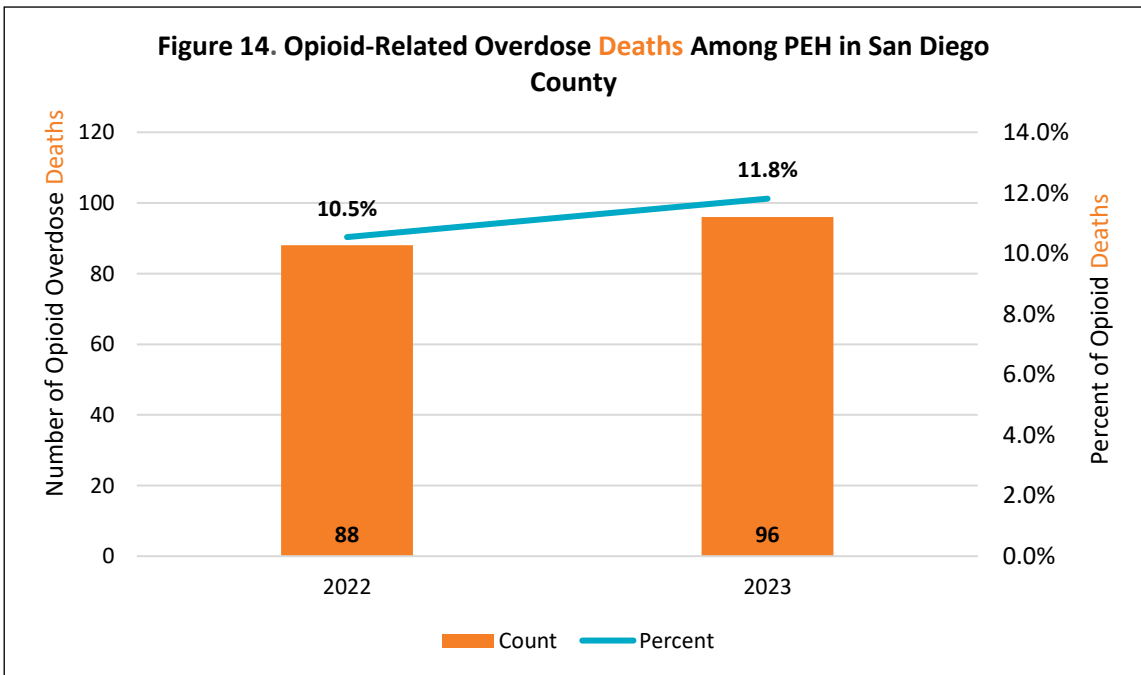
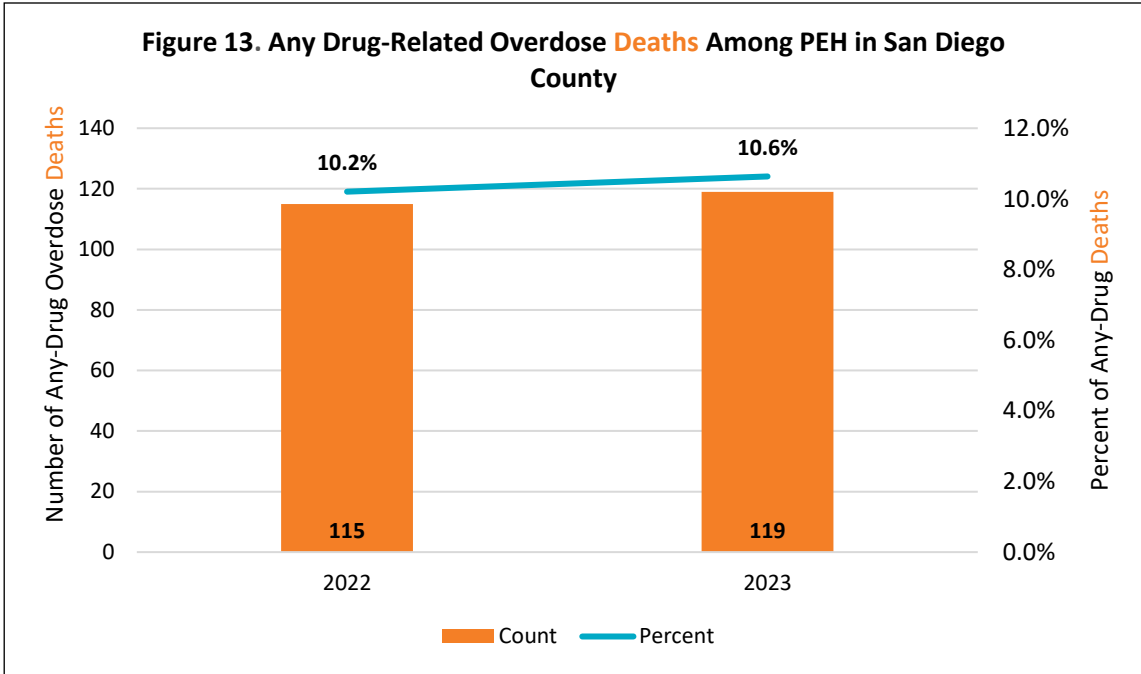
The following data sources are utilized:

- Mortality data from the Vital Records Business Intelligence System (VRBIS), which is managed by the California Department of Public Health.
 - Overdose deaths that occurred within San Diego county regardless intent. PEH specific data is only available beginning in 2022.
- Non-fatal ED and non-fatal inpatient hospitalization (HOSP) discharge data from California Department of Health Care Access and Information (HCAI).
 - Non-fatal ED and HOSP discharge data for overdose encounters at San Diego county hospitals regardless of intent.

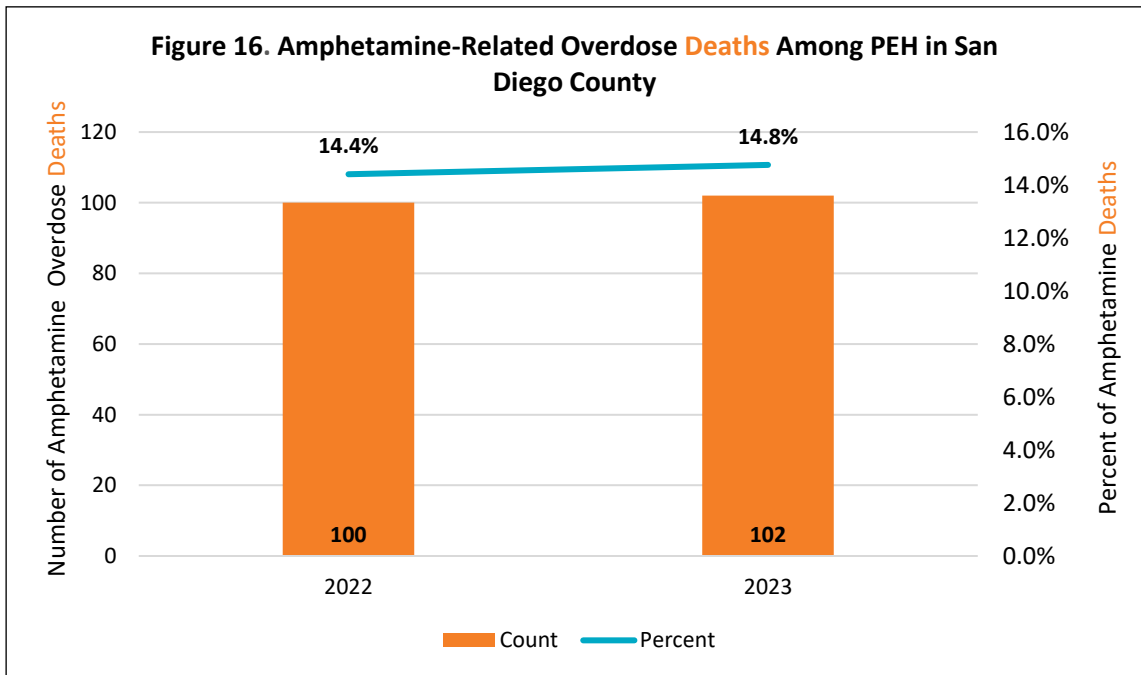
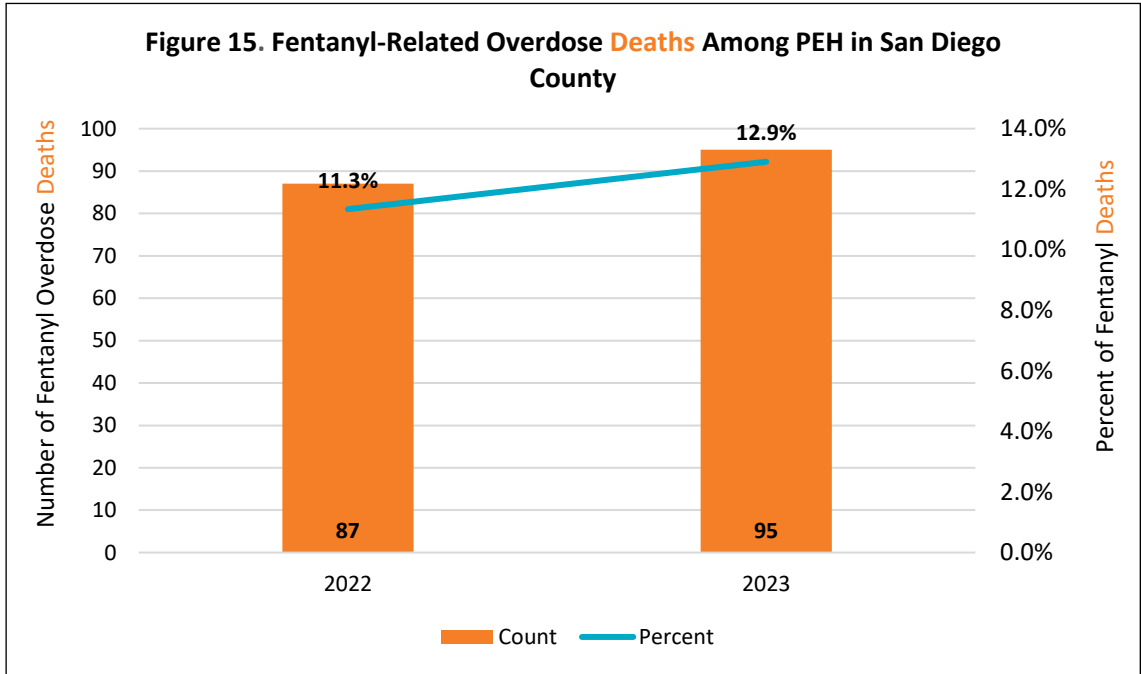
Overview

- In 2023, approximately 11% of the 1,119 any drug-related deaths in San Diego County were among PEH and an additional 11% were of unknown housing status (Figure 13).
- From 2022-2023, 11% of opioid-related overdose deaths were among PEH, 99% of PEH opioid-related deaths were fentanyl-related overdoses (Figures 14 and 15).
- From 2022-2023, PEH opioid-related deaths were highest among the demographic groups of non-Hispanic White (66%) and males (82%). The median age of PEH opioid-related overdose deaths was 45 years old, with 33% of opioid-related overdose PEH deaths occurring among individuals between the ages of 35-44 (Table 2).
- From 2019 to 2022, opioid-related overdose inpatient hospital discharges among PEH increased by 123%. In 2022, 19% of opioid-related overdose inpatient hospital discharges were among PEH, 67% of these encounters were fentanyl-related overdoses (Figures 18 and 19).
- From 2019 to 2022, amphetamine-related overdose inpatient hospital discharges among PEH decreased by 17% and in 2022 27% of amphetamine-related overdose inpatient hospital discharges occurred among the PEH population (Figure 20).
- From 2021-2022 PEH opioid-related overdose inpatient hospital discharges was highest among the demographic groups of non-Hispanic White (58%) and males (82%). The median age of PEH opioid-related overdose inpatient hospital discharges was 45 years old, with 26% of opioid-related overdose PEH hospitalizations among individuals between the ages of 35-44 (Table 3).
- From 2019 to 2022, opioid-related overdose emergency department (ED) discharges among PEH increased by 177%. In 2022, 12% of opioid-related overdose ED discharges were among PEH, 45% of these encounters fentanyl-related overdoses (Figures 22 and 23).
- From 2019 to 2022, amphetamine-related overdose ED discharges among PEH increased by 13% and in 2022 22% of amphetamine-related overdose ED discharges occurred among the PEH population (Figure 24).
- From 2021-2022, PEH opioid-related overdose ED discharges was highest among the demographic groups of non-Hispanic White (56%) and males (83%). The median age of PEH opioid-related overdose ED discharges was 38 years old, with 30% of opioid-related overdose PEH ED visits among individuals between the ages of 25-34 (Table 4).

Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness



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Table 2. Demographics of Opioid-Related Overdose Deaths, 2022-2023

	PEH N (%)	Opioid Deaths N (%)	PEH Opioid- Related Deaths (%)
	185 (100%)	1,648 (100%)	11%
Sex			
Female	31 (17%)	337 (20%)	9%
Male	152 (82%)	1,310 (79%)	12%
Unknown	1 (1%)	1 (1%)	100%
Age			
<15	*	*	*
15-24	*	101 (6%)	*
25-34	25 (14%)	396 (24%)	6%
35-44	59 (33%)	422 (26%)	14%
45-54	42 (24%)	321 (19%)	13%
55-64	41 (23%)	305 (19%)	13%
65+	11 (6%)	103 (6%)	11%
Unknown	0 (0%)	*	0%
Race/Ethnicity			
Hispanic	39 (21%)	552 (33%)	7%
NH White	120 (66%)	871 (53%)	14%
NH Black/African American	22 (12%)	169 (10%)	13%
NH American Indian/Alaska Native	*	11 (1%)	*
NH Asian	*	28 (2%)	*
NH Native Hawaiian/Pacific Islander	*	*	*
NH Other	*	*	*
Unknown	1 (1%)	8 (1%)	13%

*Data cannot be presented due to small numbers (<11).

Notes: Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown.

Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness

Figure 17. Any Drug-Related Overdose Inpatient Hospital Discharges Among PEH in San Diego County

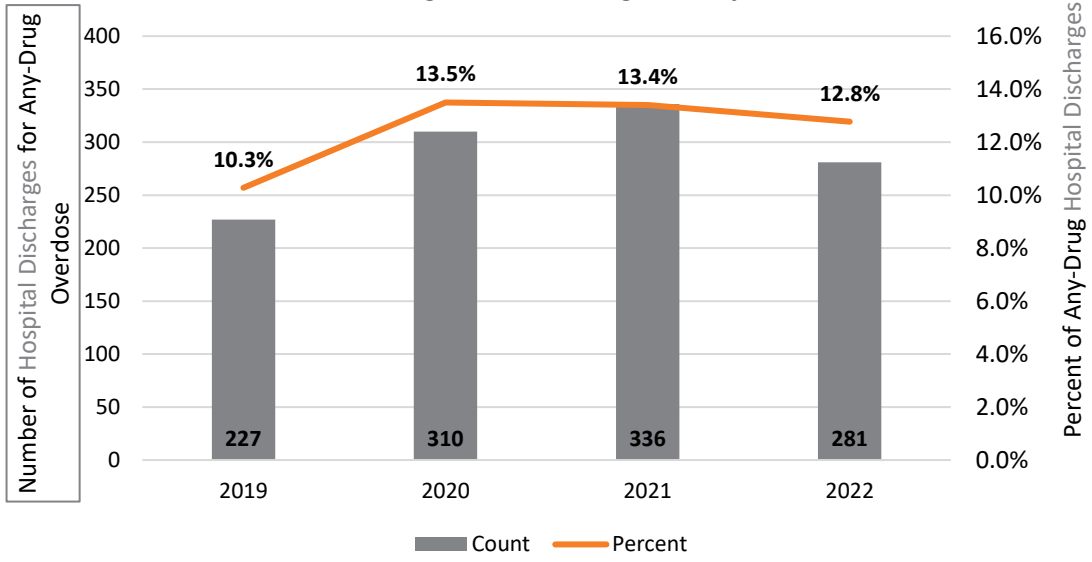
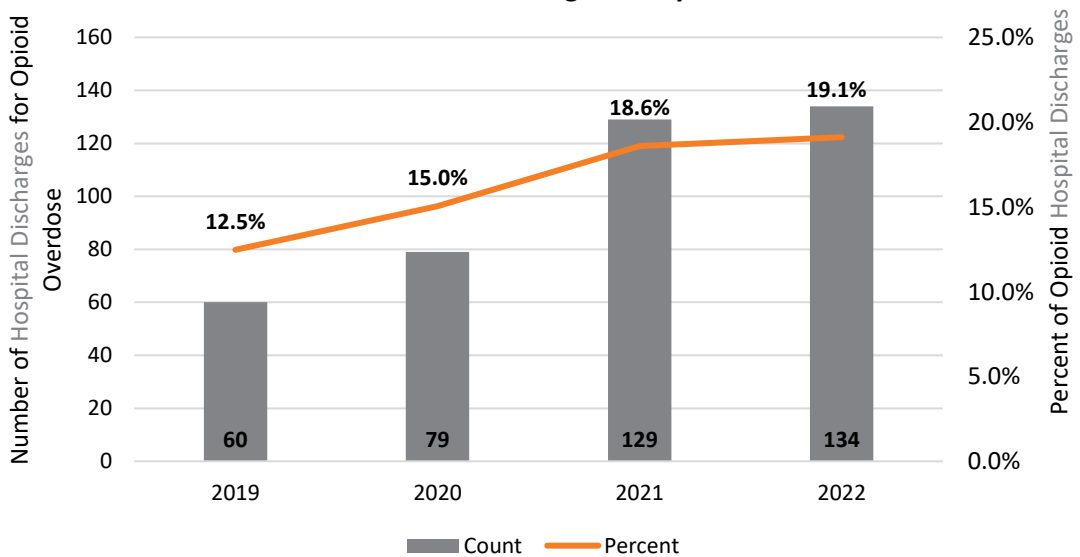
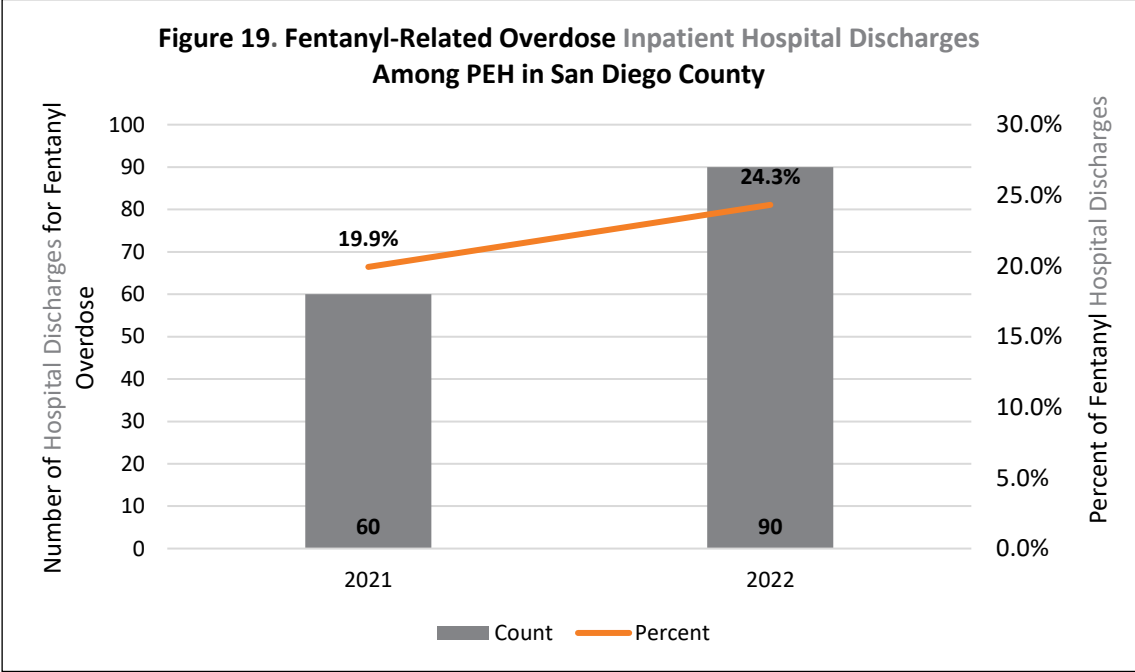


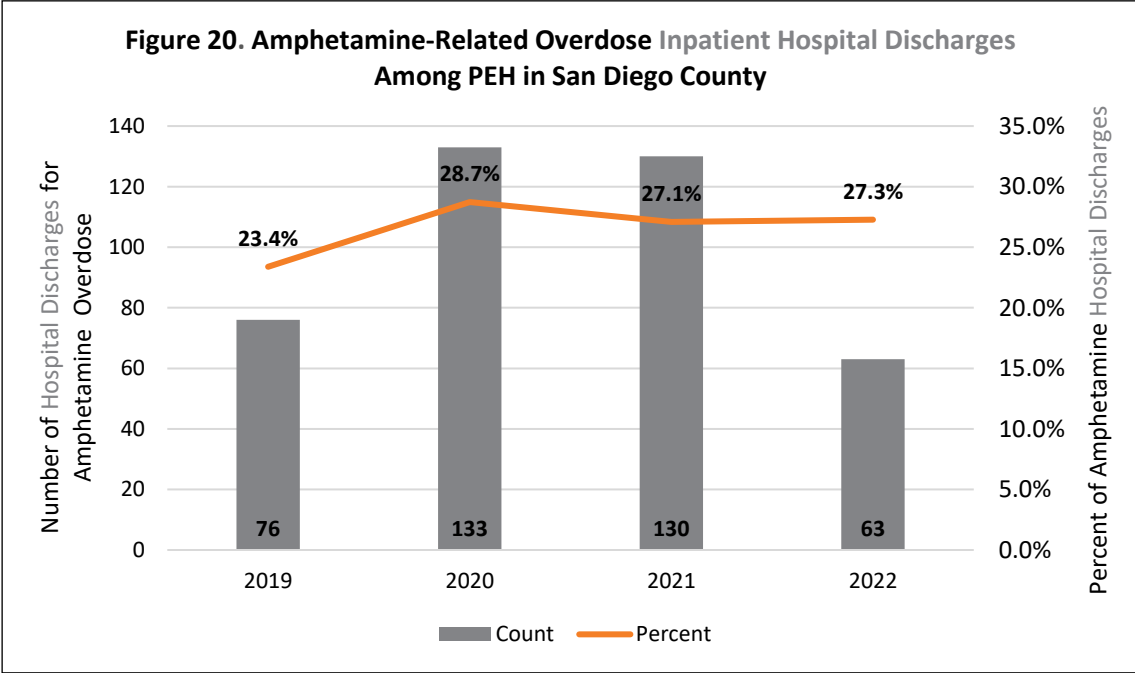
Figure 18. Opioid-Related Overdose Inpatient Hospital Discharges Among PEH in San Diego County



Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness



Note: Fentanyl ICD-10 indicator is only available beginning of 2021.



Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness

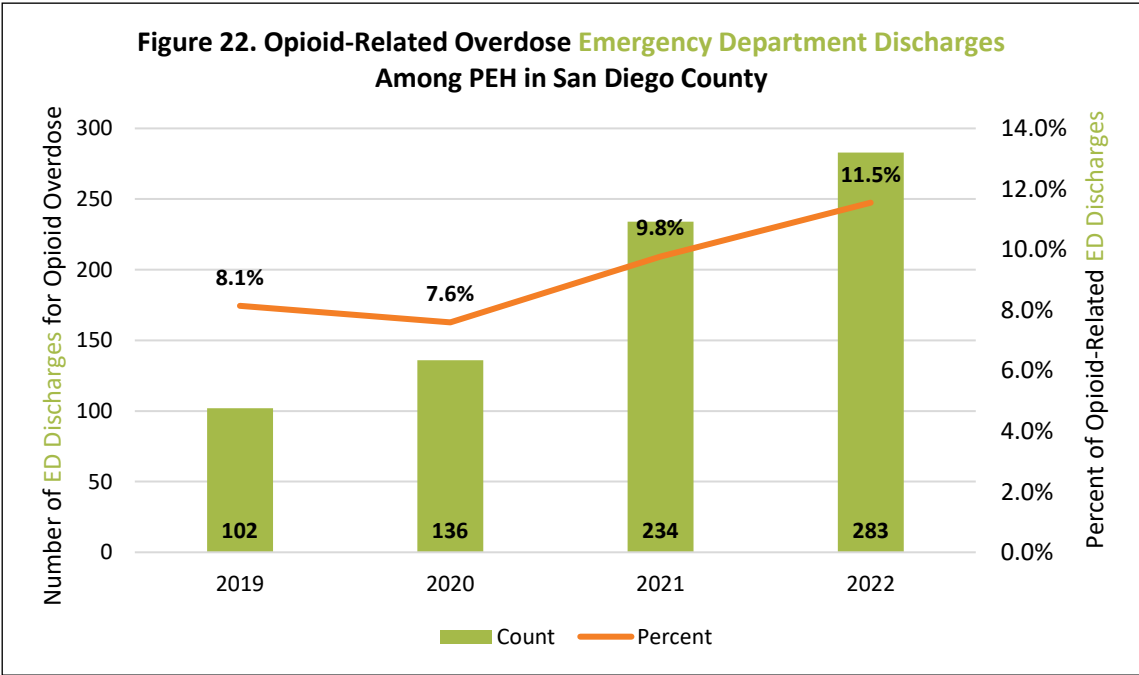
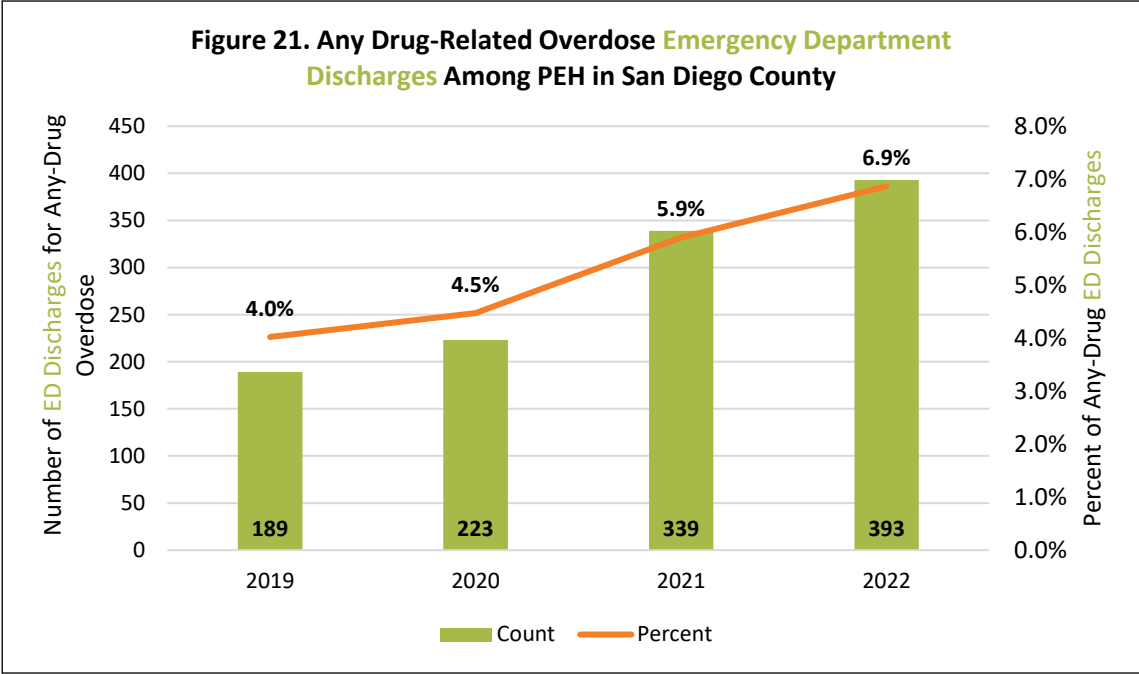
Table 3. Demographics of Opioid-Related Overdose Inpatient Hospital Discharges, 2019-2022

	PEH N (%)	Opioid-Related Inpatient Hospital Discharges N (%)	PEH-Related Opioid Inpatient Hospital Discharges (%)
	402 (100%)	2,401 (100%)	17%
Sex			
Female	73 (18%)	784 (33%)	9%
Male	329 (82%)	1,617 (67%)	20%
Unknown	0 (0%)	0 (0%)	0%
Age			
<15	0 (0%)	38 (2%)	0%
15-24	26 (7%)	241 (10%)	11%
25-34	109 (27%)	582 (24%)	19%
35-44	104 (26%)	423 (18%)	25%
45-54	73 (18%)	290 (12%)	25%
55-64	65 (16%)	410 (17%)	16%
65+	25 (6%)	417 (17%)	6%
Unknown	0 (0%)	0 (0%)	0%
Race/Ethnicity			
Hispanic	86 (22%)	589 (25%)	15%
NH White	225 (58%)	1,293 (54%)	17%
NH Black/African American	48 (12%)	254 (10%)	19%
NH American Indian/Alaska Native	*	*	*
NH Asian	*	36 (1%)	*
NH Native Hawaiian/Pacific Islander	*	*	*
NH Other	25 (6%)	148 (6%)	17%
Unknown	6 (2%)	63 (3%)	10%

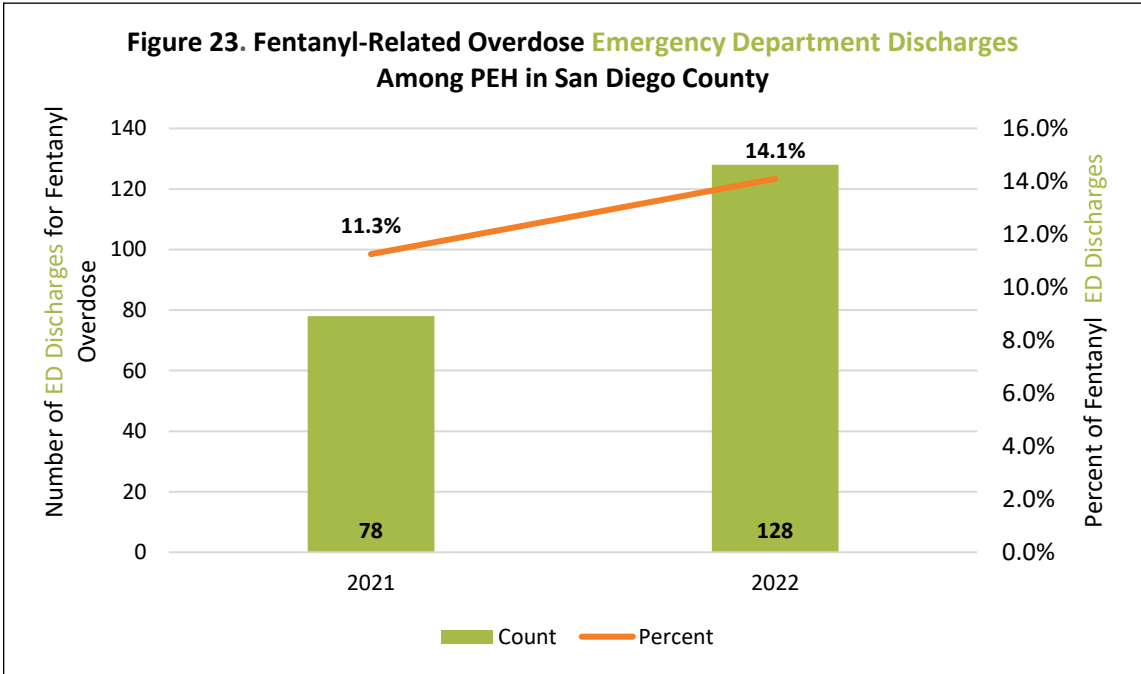
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Notes: Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown.

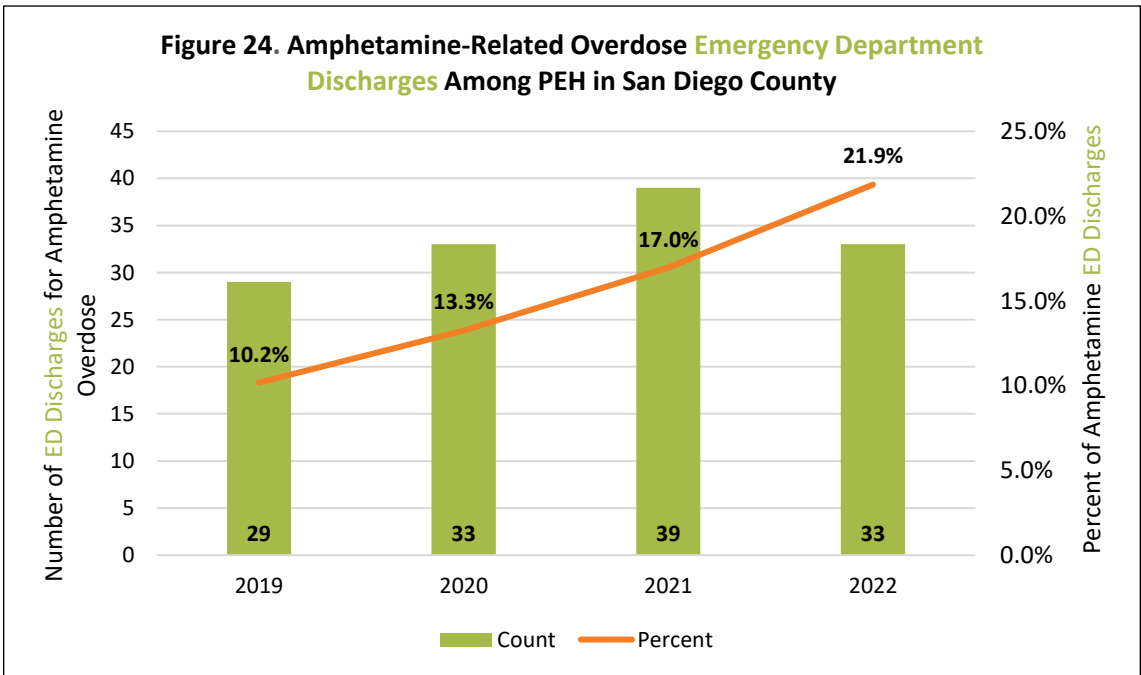
Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness



Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness



Note: Fentanyl ICD-10 indicator is only available beginning of 2021.



Feature Topic: Drug Overdoses Among Persons Experiencing Homelessness

Table 4. Demographics of Opioid-Related Overdose Emergency Department Discharges, 2019-2022

	PEH N (%)	Opioid-Related ED Discharges N (%)	PEH Opioid- Related ED Discharges (%)
	755 (100%)	7,890 (100%)	10%
Sex			
Female	130 (16%)	1,881 (24%)	7%
Male	623 (83%)	6,001 (76%)	10%
Unknown	2 (1%)	8 (1%)	25%
Age			
<15	*	85 (1%)	*
15-24	65 (9%)	1,226 (15%)	5%
25-34	229 (30%)	2,809 (36%)	8%
35-44	196 (26%)	1,715 (22%)	11%
45-54	127 (17%)	919 (12%)	14%
55-64	102 (14%)	741 (9%)	14%
65+	31 (4%)	395 (5%)	8%
Unknown	*	0 (0%)	*
Race/Ethnicity			
Hispanic	163 (22%)	2,279 (29%)	7%
NH White	419 (56%)	4,055 (51%)	10%
NH Black/African American	100 (13%)	767 (9%)	13%
NH American Indian/Alaska Native	*	21 (1%)	*
NH Asian	*	79 (1%)	*
NH Native Hawaiian/Pacific Islander	*	23 (1%)	*
NH Other	59 (8%)	509 (6%)	12%
Unknown	10 (1%)	157 (2%)	6%

*Data cannot be presented due to small numbers (<11).

Notes: Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons who race is known but ethnicity is non-Hispanic (NH) or unknown.

Definitions

Quarters are based upon calendar year and are defined as followed:

- Quarter 1 (Q1): January 1–March 31
- Quarter 2 (Q2): April 1–June 30
- Quarter 3 (Q3): July 1–September 30
- Quarter 4 (Q4): October 1–December 31

Case definitions for syndromic surveillance data:

- *Any-Drug Overdose*: Encounters with ICD-10 diagnosis codes for poisoning by drugs (T36-T50). If the diagnosis field is blank, then any-drug overdoses are identified using a text search algorithm for words related to overdose, any-drug type, or naloxone.
- *Opioid Overdoses*: Encounters with ICD-10 diagnosis codes for poisoning by opioids (T40.0X, T40.1X, T40.2X, T40.3X, T40.4, T40.60, T40.69). If the diagnosis is blank, then opioid overdoses are identified using a text search algorithm for words related to general opioids, overdose, heroin, fentanyl, and naloxone.
- *Fentanyl Overdoses*: Encounters with ICD-10 diagnosis code for poisoning by fentanyl (T40.41). If the diagnosis is blank, then fentanyl overdoses are identified using a text search algorithm for words related to fentanyl and overdose.
- *Amphetamine Overdoses*: Encounters with ICD-10 diagnosis code for poisoning by amphetamines (T43.62). If the diagnosis is blank, then amphetamine overdoses are identified using a text search algorithm for words related to amphetamine and overdose.
- *Benzodiazepine Overdoses*: Encounters with ICD-10 diagnosis code for poisoning by benzodiazepine (T42.4X). If the diagnosis is blank, then benzodiazepine overdoses are identified using a text search algorithm for words related to benzodiazepine and overdose.

Case definitions for mortality data (per [CDPH Overdose Surveillance Dashboard](#)):

- *Any-Drug Overdoses*: All overdose deaths, regardless of intent (e.g., unintentional, suicide, assault, or undetermined). This indicator does not include: (1) deaths related to chronic use of drugs (e.g., damage to organs from long-term drug use), 2) deaths due to alcohol and tobacco, and 3) deaths that occur under the influence of drugs, but do not involve acute poisoning. Deaths with any of the following ICD-10 codes as the underlying cause of death: X40-X44: Accidental poisonings by drugs; X60-X64: Intentional self-poisoning by drugs; X85: Assault by drug poisoning; Y10-Y14: Drug poisoning of undetermined intent.
- *Opioid Overdoses*: Any opioid as a contributing cause of death, regardless of intent. Opioids include both prescription opioid pain relievers such as hydrocodone, oxycodone, and morphine, as well as heroin and opium. Deaths related to chronic use of drugs are excluded from this indicator. ICD-10 codes include: T40.0: Opium; T40.1: Heroin; T40.2: Natural and semisynthetic opioids; T40.3: Methadone; T40.4: Synthetic opioids, other than methadone; T40.6: Other and unspecified narcotics.
- *Fentanyl Overdoses*: Drug overdose deaths caused by acute poisonings that involve fentanyl or fentanyl analogs as a contributing cause of death, regardless of intent. Deaths related to chronic use of drugs are excluded from this indicator. Overdose deaths involving fentanyl and associated analogs were identified by using a text search algorithm.

Definitions (continued)

- **Amphetamine Overdoses:** Drug overdose deaths caused by acute poisonings that involve psychostimulants with abuse potential excluding cocaine (T40.5), regardless of intent. Psychostimulants with abuse potential include methamphetamine, MDMA, dextroamphetamine, and levoamphetamine. Deaths related to chronic use of drugs are excluded from this indicator. Overdose deaths involving amphetamine and associated analogs were identified by using a text search algorithm.
- **Benzodiazepine Overdoses:** Drug overdose deaths caused by acute poisonings that involve benzodiazepines as a contributing cause of death, regardless of intent. Benzodiazepines include anti-anxiety medications such as alprazolam (Xanax) and lorazepam (Ativan). Deaths related to chronic use of drugs are excluded from this indicator. Overdose deaths involving benzodiazepine and associated analogs were identified by using a text search algorithm.

Persons Experiencing Homelessness and Case Definitions for Feature Topic

Mortality

- **Persons Experiencing Homelessness:** all overdose deaths that occurred within San Diego County, regardless of intent (e.g., unintentional, suicide, assault, or undetermined) with a Homeless Status indicator of "Yes". This indicator only available beginning in 2022.

Inpatient Hospitalizations and Emergency Department Discharges

- **Persons Experiencing Homelessness:** ED visits or inpatient hospitalizations at a San Diego County Hospital with other diagnoses coexisting at the time of admission or present at admission; identified in medical history or examination; external causes of morbidity related to house and economic circumstances indicating homelessness (unspecified, sheltered, or unsheltered). ICD-10 codes include Z59.00, Z59.01, Z59.02.
- **Any Drug Overdose:** ED visits or inpatient hospitalizations caused by non-fatal acute poisonings due to the effects of drugs, regardless of intent. ED visits or inpatient hospitalizations related to late effects, adverse effects, and chronic poisonings due to the effects of drugs (e.g., damage to organs from long-term drug use) are excluded from this indicator. ICD-10 codes include: T36-T50.
- **Opioid Overdose:** ED visits or inpatient hospitalizations caused by non-fatal acute poisonings due to the effects of any opioid drugs, regardless of intent. ED visits or inpatient hospitalizations related to late effects, adverse effects, and chronic poisonings due to the effects of drugs are excluded from this indicator. Beginning in the 4th quarter of 2020, the generic ICD10-CM code for other synthetic narcotics (T40.4X) was replaced by three more specific codes (T40.41, T40.42, T40.49). ICD-10 codes include: T40.0X, T40.1X, T40.2X, T40.3X, T40.41, T40.42, T40.49, T40.60, T40.69
- **Fentanyl Overdoses:** ED visits or inpatient hospitalizations caused by non-fatal acute poisonings due to the effects of fentanyl or fentanyl analogs, regardless of intent. ED visits or inpatient hospitalizations related to late effects, adverse effects, and chronic poisonings due to the effects of drugs (e.g., damage to organs from long-term drug use) are excluded from this indicator. This indicator is only available beginning in 2021. ICD-10 codes include: T40.41.
- **Amphetamine Overdose:** ED visits or inpatient hospitalizations caused by non-fatal acute poisonings due to the effects of amphetamines (stimulants such as methamphetamine), regardless of intent. ED visits or inpatient hospitalizations related to late effects, adverse effects, and chronic poisonings due to the effects of drugs, are excluded from this indicator.

Limitations

- Overdoses that result in ED visits, hospitalizations, or deaths represent only a portion of the overall burden of drug overdoses.
- The accuracy of indicators based on ICD-10-CM codes found in syndromic surveillance ED visit data is limited by the completeness and quality of reporting and coding.
- Syndromic surveillance chief complaint is recorded as a free text field and captures the patient's primary reason for seeking medical care in near real-time; this may lack content that could assist public health with interpretation of the reason for visit.

Sources

1. Regional Taskforce on Homelessness (RTFH). (2024, May 22). San Diego CoC Region 2024 Point-in-Time Count Data. RTFHSD.org. <https://www.rtfhsd.org/wp-content/uploads/2024-San-Diego-Regional-Breakdown-1.pdf>
2. Demeter NE, Hirschi HH, Pinsker EA. California State Unintentional Drug Overdose Reporting System: 2019 Overview Data Brief. Overdose Prevention Initiative. California Department of Public Health. July 2023.