Non-fatal overdose amongst opiate users in Wales: 
Review process and findings 2015-2017

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Health Protection, Public Health Wales
Aim and rationale

‘Reduce the number of substance misuse related deaths and non-fatal drug/alcohol poisonings in Wales’, measured specifically in relation to drugs by:

i. Reduction in the number of substance misuse related deaths

ii. Decrease in hospital admissions for poisoning with drugs

- Research to inform:
  - Questionnaire (n=661) - Prevalence of non-fatal overdose\(^1,2\)
  - Qualitative interviews\(^3\) (n=55 subset of above) – Nature and circumstance of overdose events – evidence from 107 overdose events

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Findings quantitative (N=661)

• 47% of respondents reported having OD’d at least once in their lives

• 15% had OD’d in the last year

• Of those that had overdosed:
  – Average no. ODs in last year = 2
  – 95% ODs accidental
  – 96% from injecting opiates
  – 66% of events ambulance was called
  – 40% of events naloxone administered
  – 27% of events CPR used


Can we plan based on this evidence?

If:
- Estimated 25,000 problematic opioid users in Wales\(^4\)
- Of which 9,671 opioid PWID\(^5\) (in regular contact with NSP)
  - If 15\% annual overdose - average 2 OD per annum
  - 66\% ambulance/hospital then...
  - could expect around **1915** admissions per annum....

4. EMCDDA definition: ‘Problem drug use’ is defined by the EMCDDA as ‘injecting drug use or long duration or regular use of opioids, cocaine and/or amphetamines’.
Number of hospital admissions for opioid poisonings
Wales
2012/13 to 2016/17

Opioids accounted for 46% of total admissions for illicit drugs.
Fatal drug poisonings 2005-2016
Fatal drug poisonings

Full implementation of Take home Naloxone

![Bar chart showing the European age-standardised rate per 100,000 population from 2005-07 to 2014-16 for England and Wales. The chart indicates a significant increase in rates after the full implementation of Take home Naloxone.]
• 40% increase in provision on previous year

• THN was reportedly used in 589 drug poisoning events during 2016-17

• Outcome was reported for 92%

• Fatalities occurred in less than 1 per cent of cases.

• If 1600 opioid non-fatal poisonings, coverage = 36.8%
Findings qualitative (N=55)

Characteristics:

- 82% male
- 34 mean age (18-54)
- 100% ever used heroin
- 95% ever injected
- 71% currently in treatment
- 78% ever in prison

Harm reduction and OD experience

<table>
<thead>
<tr>
<th>Variable</th>
<th>N</th>
<th>%</th>
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</thead>
</table>
| THN training                    | 43 | 78%
| Ever had a THN kit             | 36 | 65%
| Ever used THN kit              | 17 | 31%
| Used THN kit multiple times    | 6  | 11%
| Currently got a THN kit        | 20 | 36%

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<th>Variable</th>
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| OD ever                         | 44 | 80%
| Multiple OD                    | 36 | 65%

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<th>Variable</th>
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| Witnessed OD                   | 51 | 93%
| Witnessed fatality             | 19 | 35%

# Process – non-fatal drug poisoning reviews

**Wales Accord on the Sharing of Personal Information**

**Information Sharing Protocol for Reducing fatal and non-fatal drug related poisoning**  
(Swansea, Neath Port Talbot, Bridgend)

**Version:** Final Reviewed 2016

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## Appendix C – Overdose Information Response Sheet

### NON-FATAL DRUG RELATED POISONING RESPONSE SHEET

<table>
<thead>
<tr>
<th>Name of individual (aliases if known)</th>
<th>Date of birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Location of overdose</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of overdose</th>
<th>Substance(s) used</th>
<th>No of previous reported overdoses if known</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Substance(s) at scene</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Naloxone Administered</th>
<th>By whom</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living arrangements</td>
<td>Ethnicity</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of person completing information</th>
<th>Agency</th>
</tr>
</thead>
</table>

Is this individual currently known to your agency? (please tick)

- [ ] Yes
- [ ] No

If yes, who is their keyworker? ........................................................................................................

When were they last seen by your agency? ................................................................................................

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If they are not currently known to your agency, is the individual previously known to your agency? (please tick)

- [ ] Yes
- [ ] No

If yes, when were they last known to your agency? ...........................................................................

Are you able to contact the individual to offer overdose awareness information and naloxone training?

- [ ] Yes
- [ ] No

Do you know if this individual has received naloxone training?

- [ ] Yes
- [ ] No

If yes, please provide any known details (e.g., date trained, agency delivering training etc.)

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Any involvement of the criminal justice system (if know)

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Any other comments

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Date of completion

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Please return via email to:  
The Case Review Coordinator  
(cdat.neath@abmucymru.cjsm.net)
Non-fatal review process

**Drug Poisoning Reviews**
- Implemented in all Health Boards
- June 2014 – December 2016

**Fatal Drug Poisoning Reviews**
- 196 Fatal Drug Poisoning Reviews Conducted
- 81% Male
- 36 Years (Median age)
- 6% Under 25 years age
- 54% homeless / living in non secure housing

**Non-Fatal Drug Poisoning Reviews**
- 342 Non-Fatal Drug Poisoning Reviews Conducted
- 80% Male
- 33 Years (Median age)
- 16% Under 25 years age
- 47% homeless / living in non secure housing
The chart illustrates the number of total cases reviewed across different age ranges for both female and male individuals. The data is sourced from the Harm Reduction Database (HRO) and Drug Poisoning Database, 2017.
Contact with services (in last 6 months)

- 66.9% - in contact with services:
- 14.6% - known to but no contact with services

BUT

- 18.5% - not known to any relevant services
Thank you

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www.publichealthwales.co.uk/substance misuse