Wayne County (Detroit Area)
Sentinel Community Site (SCS)
Drug Use Patterns and Trends, 2019

November 2019

NDEWS Coordinating Center
A unique feature of NDEWS is its capability to describe and compare drug use patterns and trends in selected communities across the United States. The NDEWS Coordinating Center works closely with Sentinel Community Epidemiologists (SCEs) in 12 Sentinel Community Sites (SCSs) across the U.S. Emerging drugs and changing drug trends are monitored by each local SCE utilizing indicators such as drug overdose deaths, treatment admissions, hospital cases, poison center exposure calls, and law enforcement seizures. In May 2019, each SCE was asked to review available indicators and identify up to five drugs they considered most important to summarize for their site and include in their 2019 annual Drug Use Patterns and Trends Report.

Sentinel Community Epidemiologists (SCEs)

Atlanta Metro
Brian J. Dew, PhD
Dept of Counseling and Psychological Svcs
Georgia State University
Phone: 404-413-8168
bdew@gsu.edu

Chicago Metro
Lawrence J. Ouellet, PhD
School of Public Health
University of Illinois at Chicago
Phone: 312-355-0145
ljo@uic.edu

Denver Metro
Marion Rorke, MPH
Dept of Public Health and Environment
City and County of Denver
Phone: 720-865-5453
marion.rorke@denvergov.org

Wayne County (Detroit Area)
Cynthia L. Arfken, PhD
Dept of Psychiatry and Behavioral Neurosciences
Wayne State University
Phone: 313-993-3490
cynthia.arfken@wayne.edu

Los Angeles County
Mary-Lynn Brecht, PhD
Integrated Substance Abuse Programs
University of California at Los Angeles
Phone: 310-983-1196
lbrecht@ucla.edu

Maine
Marcella H. Sorg, PhD, RN
Rural Drug and Alcohol Research Program
University of Maine
Phone: 207-581-2596
mhsorg@maine.edu

Southeastern Florida (Miami Area)
Ben Hackworth, MPH
Commission on Behavioral Health & Drug Prevention
United Way of Broward County
Phone: 954-453-3740
bhackworth@unitedwaybroward.org

New York City
Denise Paone, EdD
Bureau of Alcohol and Drug Use Prevention, Care and Treatment
New York City Dept of Health & Mental Hygiene
Phone: 347-396-7015
dpaone@health.nyc.gov

Philadelphia
Suet T. Lim, PhD
City of Philadelphia
Dept of Behavioral Health and Intellectual disAbility Services
Community Behavioral Health
Phone: 215-413-7165
suet.lim@phila.gov

San Francisco
Phillip O. Coffin, MD, MIA
San Francisco Dept of Public Health
Phone: 415-437-6282
phillip.coffin@sfdph.org

King County (Seattle Area)
Caleb Banta-Green, PhD, MSW, MPH
Alcohol and Drug Abuse Institute
University of Washington
Phone: 206-685-3919
calebbg@u.washington.edu

Texas
Jane C. Maxwell, PhD
School of Social Work
The University of Texas at Austin
Phone: 512-656-3361
jcmaxwell@austin.utexas.edu
Highlights

- Drug overdose deaths may be decreasing but they are still too high.
- Fentanyl is increasingly ruled as a cause of death and seizures are up, but there are fewer different analogues appearing (only four this year).
- Heroin appears stable for treatment admissions and as a cause of death.
- Cocaine is increasingly ruled as a cause of death and present at admission albeit not as primary drug of abuse.
- Kratom and ketamine have been detected in decedents for first time.
- Other opioids appear stable.
- Marijuana is becoming less prominent in indicators but no one believes that it is less prevalent.
- Few cases of synthetic cannabinoids and synthetic cathinones in seizures or poison control calls.
- *Polysubstance is the rule for drug overdose deaths and treatment admissions.*

NDEWS Wayne County (Detroit Area) SCS Drug Use Patterns and Trends, 2019

Cynthia L. Arfken, Ph.D.
Wayne State University
Number of Drug Overdose Deaths Over Past 3 Years

Were the declines in drug overdose deaths across race/ethnicities?

- **DECREASE**
  - Whites had a decrease of 17.6%.

- **INCREASE**
  - African Americans had an increase of 4%.
  - Arab Americans had an increase of 6 deaths (200%).
  - Asian Americans had an increase of 2 to 3.
  - Latinos had an increase of 9.5%.
Fentanyl

- Listed as a cause of **74.6% of 2018 drug overdose deaths** (preliminary numbers)
  - Higher than last 2 years: 57.3% (2017) and 50.4% (2016)
  - Fentanyl deaths were **younger** than other deaths
  - In **2017** fentanyl deaths were more likely **white** and males; no racial or gender differences observed in 2018
  - 4 analogues compared to 9 analogues in 2017
- From NFLIS, one of the few substances seeing increase in percentage of total items **seized** (0.1% - 3%)

Heroin

- Heroin is one of the **3 most commonly listed cause of death**
  - 33.0% in 2018
  - 40.8% in 2017
  - 38.2% in 2016
- Heroin is the **most common primary drug of abuse** for treatment admission but **declining**
  - 38.8% in 2018
  - 40.1% in 2017
  - 42.9% in 2016
- From NFLIS, heroin is the **third most common item identified in seizures** but declining as a percentage of total items
  - From 14.1% in 2014 to 10.1% in latest report
Cocaine

- Cocaine is one of the **3 most commonly listed cause of death**
  - 41.1% in 2018
  - 35.2% in 2017
  - 36.2% in 2016
- Cocaine is the **third most common primary drug of abuse** for treatment admission but **increasing** – it is **second** to alcohol for **any drug** of abuse
  - 12.9% in 2018
  - 11.8% in 2017
  - 10.8% in 2016
- From NFLIS, cocaine is the **second most common item identified in seizures**
  - 18% in 2014 and 18% in latest report

Kratom and Ketamine

- 2018 was the first year that kratom (mitragynine) and ketamine were listed as causing deaths
  - *All had multiple causes of death*
  - 10 decedents with mitragynine as a cause of death
    - 1 with carfentanil
    - 1 with alcohol and hydrocodone
    - 1 with fentanyl, heroin and oxycodone
    - 7 with fentanyl
  - 1 decedent with ketamine as a cause of death also had fentanyl and heroin as causes of death

Policy Changes

- Marijuana legalized in Michigan and Canada.
- Gabapentin scheduled in January 2019.
- Naloxone distribution continues but there are problems at pharmacies.
- Fentanyl strips are starting to be used.
Treatment Tables
Table 1: Trends in Admissions* to Programs Treating Substance Use Disorders, Wayne County (Detroit Area) Residents, 2014-2018

Number of Admissions and Percentage of Admissions with Selected Substances Cited as Primary Substance at Admission, by Year and Substance

<table>
<thead>
<tr>
<th>Calendar Year</th>
<th>2014</th>
<th></th>
<th>2015</th>
<th></th>
<th>2016</th>
<th></th>
<th>2017</th>
<th></th>
<th>2018</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
<td>(%)</td>
<td>(#)</td>
<td>(%)</td>
</tr>
<tr>
<td><strong>Total Admissions (#)</strong></td>
<td>11,976</td>
<td>100%</td>
<td>13,420</td>
<td>100%</td>
<td>18,005</td>
<td>100%</td>
<td>21,191</td>
<td>100%</td>
<td>18,293</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Primary Substance of Abuse (%)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol</td>
<td>3,904</td>
<td>32.6%</td>
<td>4,582</td>
<td>34.1%</td>
<td>5,843</td>
<td>32.5%</td>
<td>7,254</td>
<td>34.2%</td>
<td>6,387</td>
<td>34.9%</td>
</tr>
<tr>
<td>Cocaine/Crack</td>
<td>1,220</td>
<td>10.2%</td>
<td>1,556</td>
<td>11.6%</td>
<td>1,938</td>
<td>10.8%</td>
<td>2,506</td>
<td>11.8%</td>
<td>2,353</td>
<td>12.9%</td>
</tr>
<tr>
<td>Heroin</td>
<td>4,867</td>
<td>40.6%</td>
<td>5,207</td>
<td>38.8%</td>
<td>7,726</td>
<td>42.9%</td>
<td>8,500</td>
<td>40.1%</td>
<td>7,091</td>
<td>38.8%</td>
</tr>
<tr>
<td>Prescription Opioids</td>
<td>746</td>
<td>6.2%</td>
<td>881</td>
<td>6.6%</td>
<td>992</td>
<td>5.5%</td>
<td>1,228</td>
<td>5.8%</td>
<td>1,021</td>
<td>5.6%</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>24</td>
<td>0.2%</td>
<td>12</td>
<td>0.1%</td>
<td>27</td>
<td>0.1%</td>
<td>34</td>
<td>0.2%</td>
<td>50</td>
<td>0.3%</td>
</tr>
<tr>
<td>Marijuana</td>
<td>1,049</td>
<td>8.8%</td>
<td>1,042</td>
<td>7.8%</td>
<td>1,242</td>
<td>6.9%</td>
<td>1,433</td>
<td>6.8%</td>
<td>1,199</td>
<td>6.6%</td>
</tr>
<tr>
<td>Benzodiazepines</td>
<td>96</td>
<td>0.8%</td>
<td>77</td>
<td>0.6%</td>
<td>165</td>
<td>0.9%</td>
<td>149</td>
<td>0.7%</td>
<td>100</td>
<td>0.5%</td>
</tr>
<tr>
<td>MDMA</td>
<td>8</td>
<td>0.1%</td>
<td>4</td>
<td>0.0%</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
</tr>
<tr>
<td>Synthetic Stimulants**</td>
<td>unavail</td>
<td>unavail</td>
<td>8</td>
<td>0.1%</td>
<td>21</td>
<td>0.1%</td>
<td>28</td>
<td>0.1%</td>
<td>32</td>
<td>0.2%</td>
</tr>
<tr>
<td>Synthetic Cannabinoids</td>
<td>0</td>
<td>0.0%</td>
<td>0</td>
<td>0.0%</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
<td>unavail</td>
</tr>
<tr>
<td>Other Drugs/Unknown</td>
<td>62</td>
<td>0.5%</td>
<td>51</td>
<td>0.4%</td>
<td>51</td>
<td>0.3%</td>
<td>59</td>
<td>0.3%</td>
<td>60</td>
<td>0.3%</td>
</tr>
</tbody>
</table>

**NOTES:**

*Admissions: Admissions whose treatment was covered by Medicaid or Block Grant funds; excludes admissions covered by private insurance, treatment paid for in cash, and admissions funded by the Michigan Department of Corrections. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

**Synthetic Stimulants:** Includes amphetamines and synthetic stimulants.

unavail/sup: Data suppressed to protect confidentiality; unavail: Data not available.

**SOURCE:** Data provided to the Wayne County (Detroit Area) NDEWS SCE by the Michigan Department of Health and Human Services, Bureau of Behavioral Health and Developmental Disabilities, Division of Quality Management and Planning, Performance Measurement and Evaluation Section.
<table>
<thead>
<tr>
<th>Primary Substance</th>
<th>Number of Admissions (#)</th>
<th>Sex (%)</th>
<th>Race/Ethnicity (%)</th>
<th>Age Group (%)</th>
<th>Route of Administration (%)</th>
<th>Secondary Substance (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6,387 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2,353 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7,091 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1,021 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1,199 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>100 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>32 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>unavail</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTES:

* Admissions: Admissions whose treatment was covered by Medicaid or Block Grant funds; excludes admissions covered by private insurance, treatment paid for in cash, and admissions funded by the Michigan Department of Corrections. Each admission does not necessarily represent a unique individual because some individuals are admitted to treatment more than once in a given period.

** Synthetic Stimulants: Includes amphetamines and synthetic stimulants.

n/a: Not applicable; unavail: Data not available; Percentages may not sum to 100 due to missing data, rounding, and/or because not all possible categories are presented in the table. Category frequencies may not sum to drug total due to missing data and/or not all possible categories are presented in the table.

SOURCE: Data provided to the Wayne County (Detroit Area) NDEWS SCE by the Michigan Department of Health and Human Services, Bureau of Behavioral Health and Developmental Disabilities, Division of Quality Management and Planning, Performance Measurement and Evaluation Section.
Sources

DATA FOR THIS REPORT WERE DRAWN FROM THE FOLLOWING SOURCES:

**Treatment admissions** data for 2018 from publicly-funded substance disorder treatment facilities were provided by Darlene Owens and Samy Ganesan of the Detroit Wayne Mental Health Authority.

**Data on drug reports among drug items seized** in Wayne County and the state of Michigan and analyzed were provided by the National Forensic Laboratory Information System (NFLIS) for calendar years 2014-1H2018.

**Numbers of drug-associated deaths** for Wayne County were provided by Amanda Kogowski, Project Manager for the System for Opioid Overdose Surveillance, who receives the data from the Office of the Medical Examiner (Wayne County). 2018 data are subject to change as more cases are closed. Data reflect people who died in Wayne County, had cause of death indicating drug overdose death (7 removed from carbon monoxide poisoning, no drug or alcohol found). Almost all of these deaths were considered accidental (96.4%) but also included suicide (n=17) and those deemed natural (n=9).

*Contact Information: For additional information about the drugs and drug use patterns discussed in this report, please contact Cynthia L. Arfken, Ph.D., Professor, Wayne State University, Department of Psychiatry and Behavioral Neurosciences, 3901 Chrysler Service Drive, Tolan Park Medical Building, Detroit, MI 48207, Phone: 313–993–3490, E-mail: cynthia.arfken@wayne.edu.*