

Summary of Drug Overdose Deaths in Dane County

2000-2022



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Introduction

Dane County has been experiencing an ongoing and preventable tragedy. Since 2016, the number of people who lost their lives to a drug overdose nearly doubled. Behind these numbers are real people who lived full lives. They are loved and missed. The following data brief provides information on people who died of a drug overdose in Dane County from 2000—2022 and updates our previous [report](#). It covers a time where we saw the worst loss of life due to overdose in Dane County, to a glimmer of hope and the first decrease in overdose deaths we've seen in years. While the previous report included recommendations from Dane County's Overdose Fatality Review (OFR), this report will focus on updating the data. Please see the appendix for full analytic methods and technical notes. New recommendations from the OFR are expected in 2025.

Key Takeaways

Trends in Overdose Deaths

- For the first time in four years, drug overdose deaths in Dane County decreased.
- There were 147 deaths in Dane County due to a drug overdose during 2022, which is still 35% higher than the number just five years ago.

Trends in Substances Involved

- Opioids are still the main driver of overdose deaths in Dane County. However, the types of opioids involved have changed over the years.
- Synthetic opioids, such as fentanyl, have replaced heroin and prescription drugs as the main contributor to overdose deaths.
- There has been an increase in overdose deaths involving cocaine, largely due to fentanyl being mixed in the cocaine supply.

Characteristics of People who Died

- In recent years, the highest drug overdose death rates have been among those 35-54 years of age.
- 31% of overdose deaths occurred among people who identify as BIPOC (Black, Indigenous, People of Color).
- Black people were over 4.5 times more likely to die of an overdose compared with Dane County as a whole.

Trends to Watch

- Xylazine, an emerging substance, was involved in 3% of overdose deaths in Dane County from 2020-2022.
- Other important trends include a switch from injection to smoking, overdose among people who are unhoused, and overdose among Black men. An additional report will be released focusing on the longstanding inequities that increase overdose risk among Black people.

Next Steps

- There were over 12,000 client visits to Public Health's Syringe Services Program in 2023. There is an urgent need to continue providing a full range of safer use and harm reduction services to reduce overdose deaths and harms to people who use drugs.
- The Dane County Overdose Fatality Review team relaunched in February 2024 and will be releasing follow up recommendations from the previous [OFR report](#).



Trends in Drug Overdose Deaths

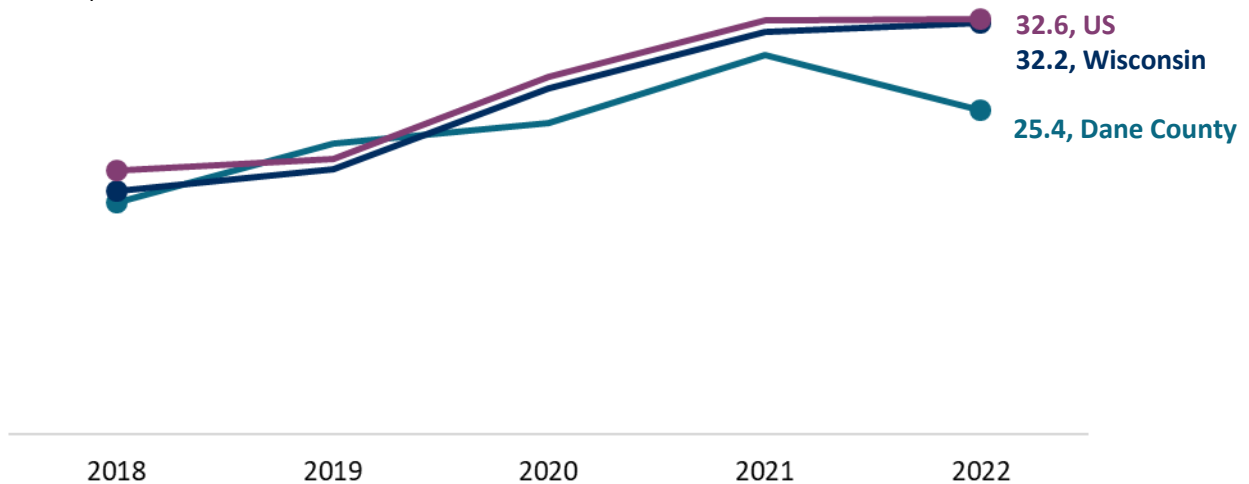
The drug overdose epidemic continues to be a public health crisis. Based on the mostly recently available data, the age-adjusted drug overdose death rate:

- Was 25.4 per 100,000 people in Dane County in 2022, which is lower than in Wisconsin or the nation,
- Decreased by 15% in Dane County from 2021 to 2022, but
- Is still unacceptably high.

The age-adjusted overdose death rate was lower in 2022 because there were fewer deaths.

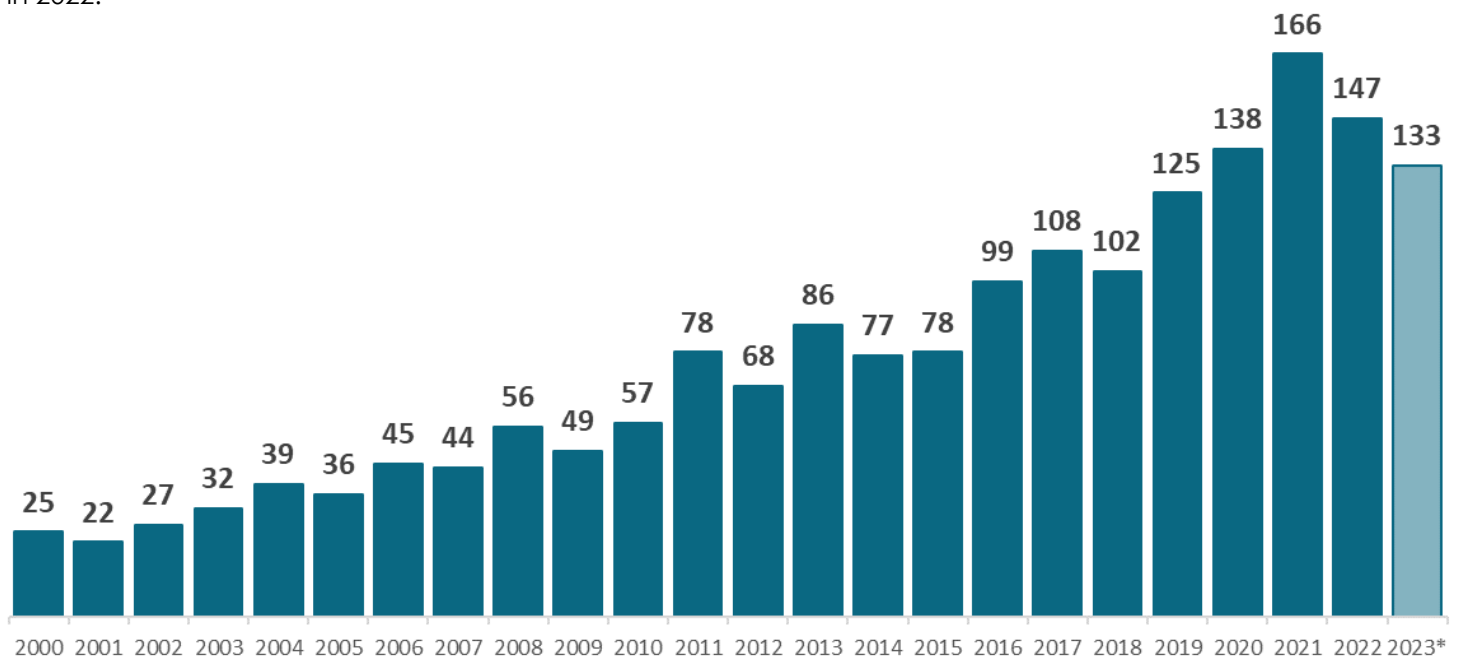
The rate in Dane County remains lower than that of Wisconsin and the nation.

Age-adjusted rate per 100,000



The number of people who died due to a drug overdose in Dane County decreased in 2022 for the first time in four years.

While the data are not yet finalized, the number of overdose deaths in 2023 is likely to be similar to the number in 2022.



*2023 data is provisional and is likely to change.

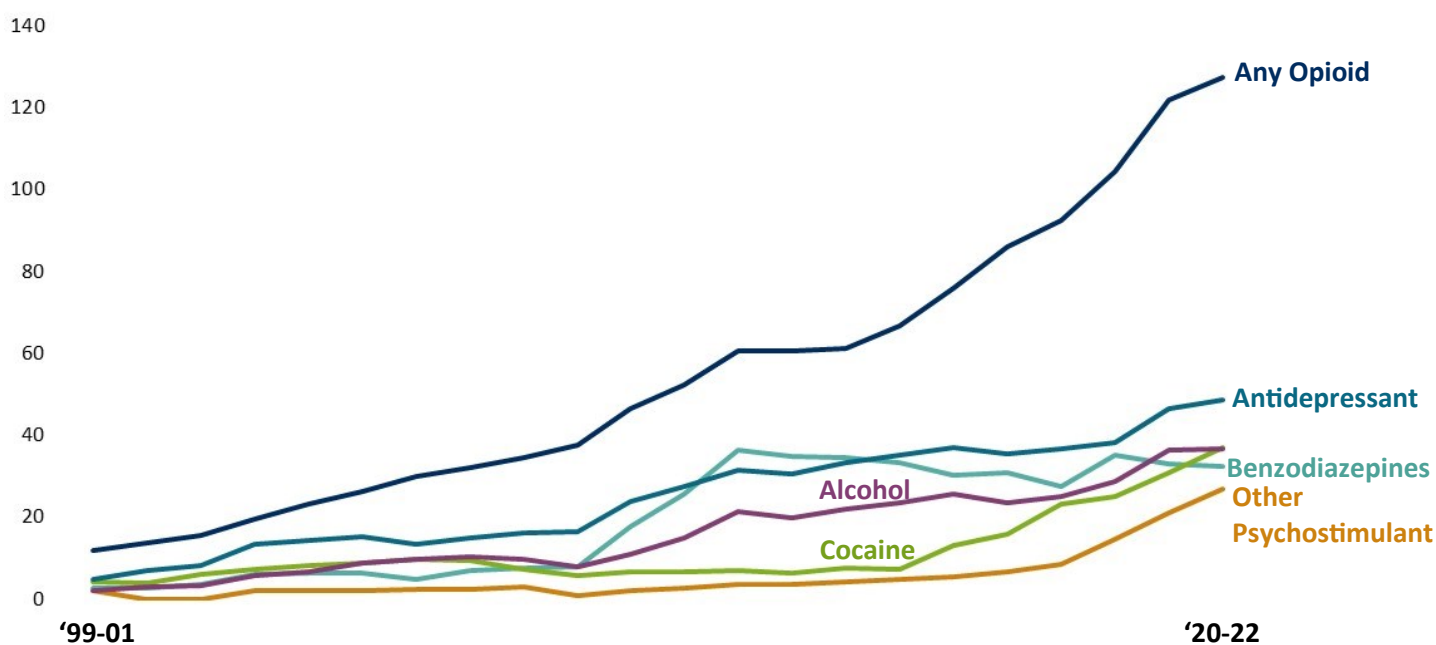
Trends in Substances Involved

As highlighted in the graphs below, substances contributing to overdose deaths have changed over time. There has been a sharp rise of synthetic opioids contributing to overdose deaths since 2013, when fentanyl and its analogues became widely distributed.

Opioids are responsible for most overdose deaths in Dane County. However, the number of deaths involving antidepressants, alcohol, cocaine and other psychostimulants has increased in recent years. The involvement of benzodiazepines has been relatively stable.

Substances are not mutually exclusive, and more than one substance may have been involved in a death.

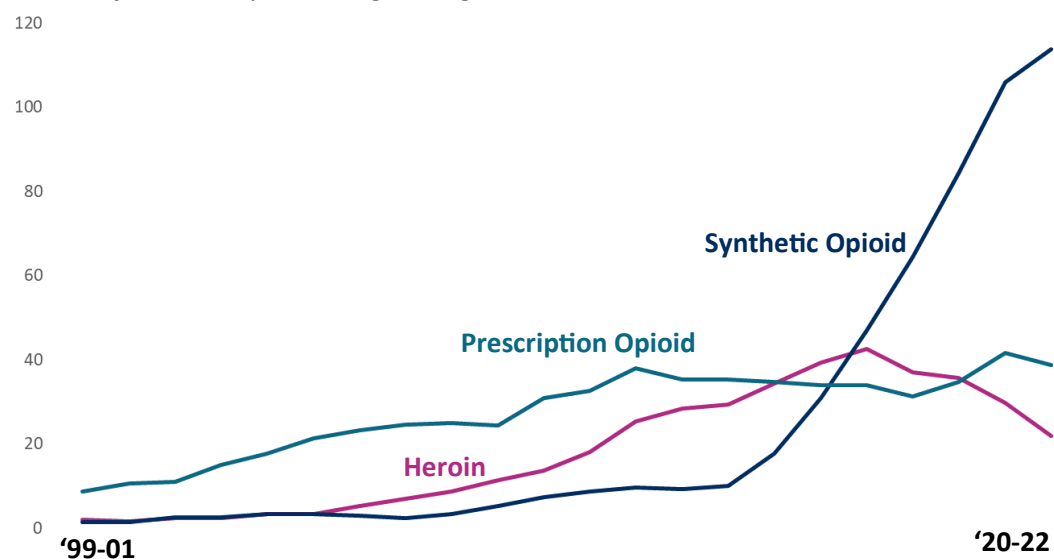
*Number of deaths, 3-year rolling average**



Overdose deaths involving synthetic opioids continue to increase.

Substances are not mutually exclusive, and more than one substance may have been involved in a death.

*Number of deaths, 3-year rolling average**



Fentanyl is a synthetic opioid that is much cheaper to produce. It has largely replaced heroin in the drug supply, which explains the decrease in heroin-related overdoses in recent years.

*Rolling averages smooth out the normal year-to-year fluctuation and allow the overall trend to be more easily visualized.



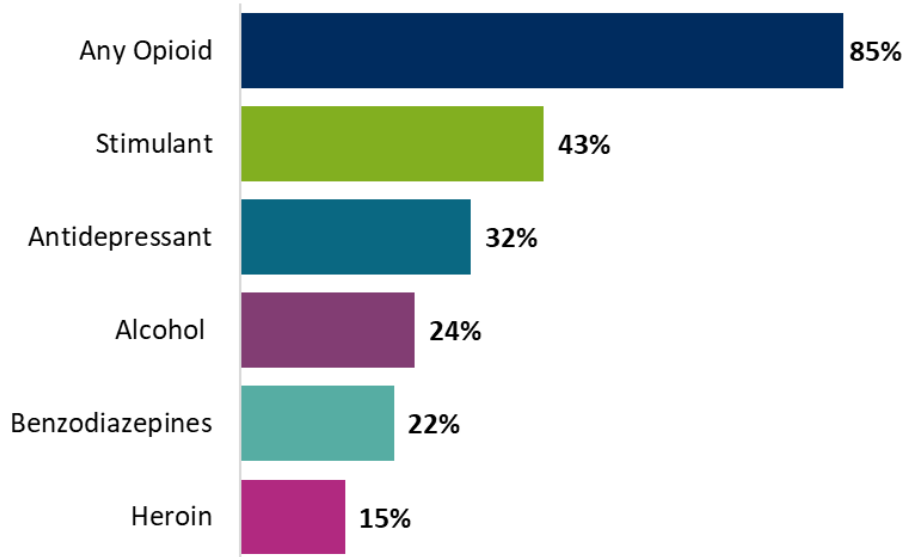
Poly Substance Use

There is rarely a single substance to blame for an overdose death. Instead, the interactions of multiple substances within someone’s system can cause an overdose. Some who engage in poly substance use may not even know they are doing so, because so many illicit substances are mixed with other substances. For example, a person may think they are using cocaine, instead they are unknowingly using a mix of fentanyl and cocaine that they cannot properly dose.

Opioids have been involved in 85% of all overdose deaths during the last 3 years (2020-2022).

The most common drug combinations are **opioids** with a **stimulant**, **antidepressant**, **alcohol**, **benzodiazepines** and/or **heroin**.

Percent of deaths, 2020-2022



Alcohol and Marijuana



Alcohol is being increasingly noted as a contributing cause of fatal drug overdoses.

- Alcohol interacts with many drugs, and the effects vary based on the drug.
- Consuming alcohol with opioids can increase the effects of both drugs, and may cause a person to lose the ability to breathe, lower their pulse and blood pressure, or cause unconsciousness.
- Alcohol can also impede someone’s ability to make safer use decisions. For example, consuming alcohol with a stimulant such as cocaine can mask the effects of each drug, leading to over consumption.
- Mixing alcohol and cocaine can produce cardiotoxicity, or muscle damage and dysfunction of the heart, which increases the risk of heart attack or stroke.



There is no evidence of fentanyl-laced marijuana in Dane County.

- In recent years there have been media reports about suspected fentanyl-laced marijuana and increasing overdoses. However, evidence suggests this is not true in Dane County.
- Toxicology reports of people who died of a drug overdose often mention marijuana. However, these tests can only detect whether a drug is present. They cannot determine if drugs were consumed together, separately, or weeks apart. Presence of both marijuana and fentanyl on toxicology reports is not evidence that marijuana was consumed on the same day the overdose occurred or was laced with fentanyl.
- Inaccurate field tests have contributed to media reports of “suspected fentanyl-laced marijuana”. As of this printing, the Wisconsin State Crime Lab has no confirmed samples of marijuana contaminated with fentanyl.

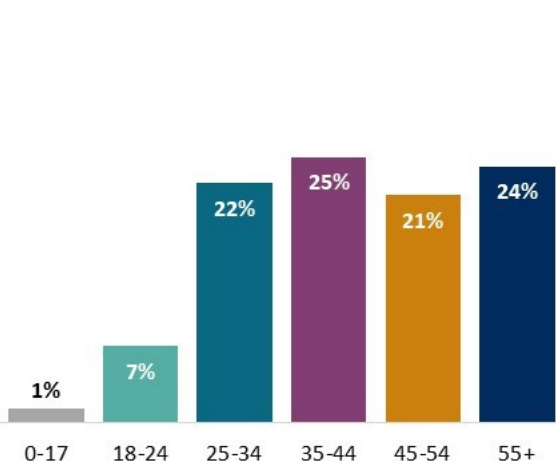


Characteristics of People Who Died

451 people lost their lives to drug overdose in Dane County from 2020-2022. Below, we share demographic information about these individuals. Some data are shown as age-adjusted rates. These numbers are mathematically transformed to account for the different age distribution and size of the populations of interest. This allows for a more accurate comparison between groups.

Age

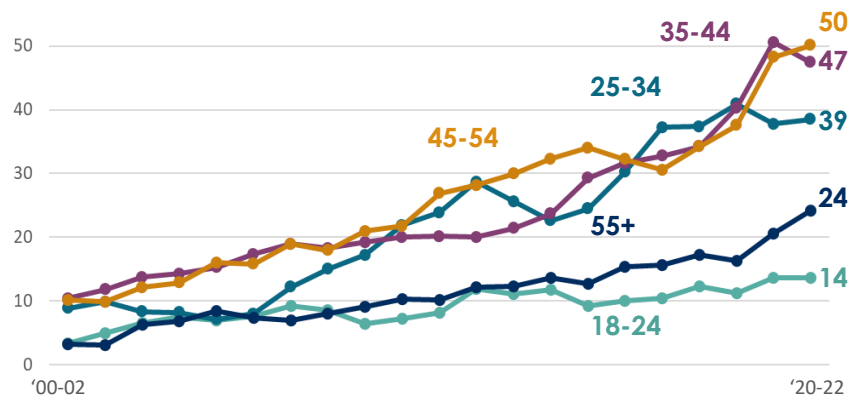
Most people who died of a drug overdose from 2020-2022 were **25 years old or older**.



Fatal drug overdoses have increased over time among people of all ages.

In recent years, the increases have been the most steep among those ages 35 and older.

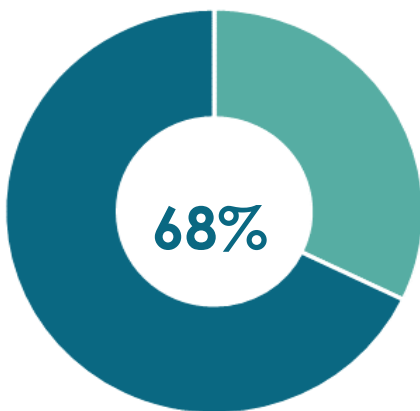
3-year overdose death rate per 100,000 people



Note: Rates not shown for people < 18 years. A total of 20 Dane County children died from 2000-2022. Rates for many of the 3-year periods are based on a small number of deaths and may be unstable. See the Appendix for confidence intervals associated with each rate.

Sex*

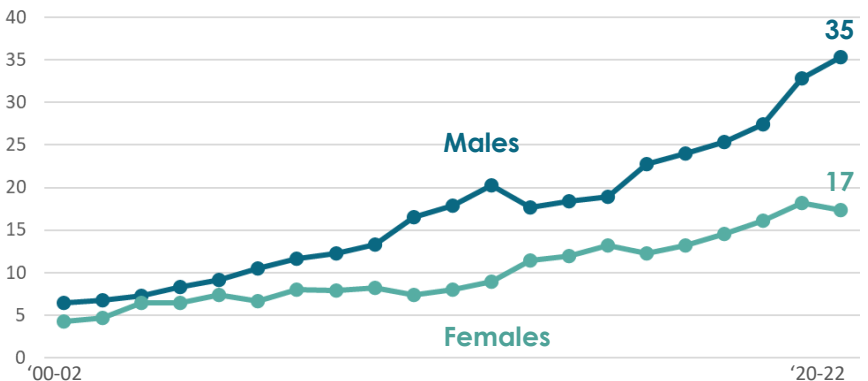
More than 2 in 3 people who died of a drug overdose death in 2020-2022 were **male**.



Men experience higher rates of drug overdose deaths compared to women.

From 2020-2022, the age-adjusted drug overdose death rate was **2 times higher among males** compared to females.

3-year age-adjusted overdose death rate per 100,000 people



*Wisconsin does not collect gender identity information on death certificates. Therefore, people who are transgender or non-binary would be misgendered on their death certificate.



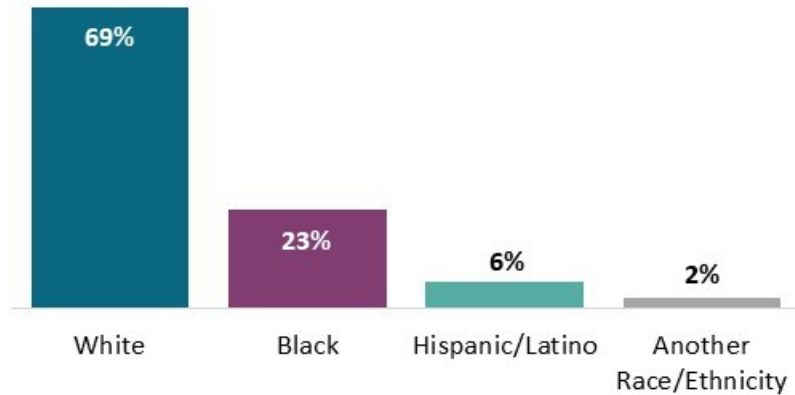
Characteristics of People Who Died (cont.)

Race and Ethnicity

White people make up the largest number and percent (69%) of people who died of a drug overdose in Dane County during 2020-2022.

31% of people who died identified as being Black, Hispanic/Latinx or another race.

Percent of deaths, 2020-2022

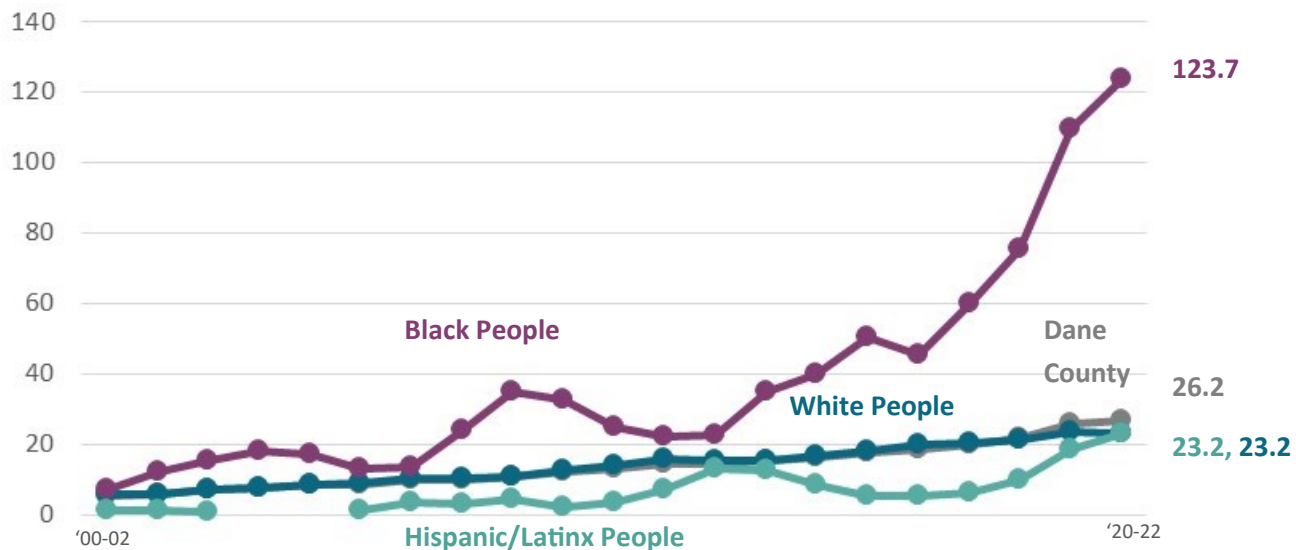


Looking at the percentage of people by race and ethnicity gives us information about groups that make up the bigger share of overdose deaths. White people make up the biggest share of overdose deaths in part because Dane County has a large White population. Rates (shown below) help us compare the impact of overdose deaths between groups of people.

Black people have experienced sharp increases in drug overdose death rates in the past decade.

The age-adjusted drug overdose death rate among **Black people** was more than 4.5 times the rate of Dane County as a whole from 2020-2022.

3-year age-adjusted overdose death rate per 100,000 people



Note: Rates for Black people & Hispanic/Latino people are based on a small number of deaths for many 3-year periods, and may be unstable. See the Appendix for confidence intervals associated with each rate.

Urgent action is needed to address the worsening racial inequities in drug overdose deaths. This injustice has worsened since the last data report. Reversing long-standing policies, systems, and structures that hinder Black wellness is critical, as is listening to voices with lived experience. Overdose deaths in the Black population will receive focused attention at the Dane County Overdose Fatality review in 2024. Additionally, a supplemental data report will be released focusing on overdose deaths among Black people.



Xylazine and nitazenes have become more common

Xylazine, an animal tranquilizer not approved for use by humans, is increasingly seen in the drug supply mixed in with [fentanyl](#), other opioids, meth, and cocaine. First seen in Puerto Rico in the early 2000's, it has now been found in fentanyl samples across the United States.

Xylazine is most often mixed with fentanyl to extend the effects of fentanyl, which is short lived. When ingested, it creates powerful sedating effects, including slowed heart rate, dangerously low blood pressure, and difficulty breathing, increasing risk for fatal overdose. Xylazine can also cause wounds and skin ulcers, and kill skin tissue, posing more risks to physical health.

Xylazine was involved in 15 (3%) of drug overdose deaths in Dane County from 2020-2022. Given the increased risk of overdose death with the combination of fentanyl and Xylazine, it is important to check drugs for the presence of Xylazine (test strips available at Public Health's Syringe Services Program) and call for medical help if someone is overdosing.

Nitazenes, another group of synthetic opioids, emerged in the unregulated street drug supply in 2019. Nitazenes have been reported to be more potent than fentanyl, but little is known about their effect on people as they've never been approved for use by humans. Nitazenes have been increasingly found in several states and countries, which triggered an [early warning advisory](#) in January 2024 from the United Nations Office on Drugs and Crime.

It is important to continue to monitor the presence of Nitazenes locally while educating on harm reduction strategies. Drug checking is one strategy to monitor the unregulated drug supply and reduce harms to people who use drugs. Unfortunately, fentanyl test strips cannot detect the presence of Nitazenes. Comprehensive drug checking utilizing an FTIR machine is needed to detect Nitazenes and these services have been proven to reduce riskier drug use behaviors.



Overdose-related deaths among Black men have increased

- The 3-year age-adjusted overdose death rate for Black men in 2020-2022 is particularly high, at 190 per 100,000 people. This is more than 5 times higher than the rate for all men in Dane County (35 per 100,000).
- 81 Black men in died from 2020-2022.
- Due to the impact overdose has on Black men locally, a supplemental report will be released focusing on Black people and families.

The overdose death rate* for Black men was over 5 times higher than men overall from 2020-2022.

*3-year age-adjusted overdose death rate per 100,000 people



Emerging Trends (cont.)



Smoking-related overdoses have been increasing

- Recent [data from the CDC](#) found that between 2020 and 2022, smoking replaced injection as the main route of use for people who died of a drug overdose in the United States. The data indicate that people who use drugs may be moving away from injection.
 - This trend supports the need for more prevention and harm reduction services for people who do not inject drugs, and to ensure access to Narcan and overdose prevention strategies.
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People who are unhoused experience barriers to recovery

- Food, shelter, and safety are among some of the most basic needs for all people. However, due to the current housing crisis across the United States, including in Dane County, many are finding their need for shelter unmet.
- Several studies have found that the unhoused population is at higher risk of opioid overdose than those with stable housing. According to a [SAMHSA point in time survey](#), 16% of people who are unhoused reported having a substance use disorder.
- Many who are unhoused are also living without any form of health insurance, making treatment options much more difficult to attain.
- With housing costs continuing to rise, along with increasing numbers of those facing homelessness, this will be a trend to watch in the coming months and years.

Public Health Harm Reduction & Prevention Efforts

Below is a summary of two main arms of our prevention and harm reduction work: syringe services and overdose fatality review. This isn't an exhaustive list of everything we do; for more information, [visit our website](#).



Syringe Services Program

To reduce substance-use-related harms and prevent overdose deaths, Public Health provides a nonjudgemental space to access safer use supplies and community resources via the Syringe Services Program (SSP). The SSP serves all people who use drugs, and in 2022 added supplies to meet the needs of people who primarily snort or smoke drugs. This strategy has increased participation, diversified client demographics, and helped to reach more people at risk for an overdose. The SSP is also a space to provide risk reduction education, share information about [overdose spikes](#) occurring in the community, and provide linkages to care (for example, sexual health, medications for opioid use disorder, and behavioral health needs). There were 12,059 client visits to the SSP in 2023. Smoking supplies, Narcan, and fentanyl test strips were the most distributed items in 2023, in addition to the distribution and disposal of 472,861 syringes.



Overdose Fatality Review

The Overdose Fatality Review (OFR) is a multi-disciplinary team of community partners with a shared goal of reducing overdose deaths in Dane County. The team meets every other month to identify common themes in the circumstances around overdose deaths, and develops recommendations to decrease risk factors and increase access to vital services. The Dane County OFR team re-launched its meetings in February 2024 after a long pause due to the COVID-19 pandemic, and currently consists of more than 30 community partners.



Substance Descriptions

Benzodiazepine (Benzos, Downers): A depressant that can be given as a prescription for mental health concerns or can be purchased illicitly. It may cause drowsiness or respiratory depression when over-consumed.

Cocaine (Coke, Crack, Blow): A stimulant that can cause euphoria, insomnia, or paranoia. There has been a rise in cocaine-related deaths that may be attributed to the increase of fentanyl being cut into the cocaine supply.

Depressant: Depressants are any substances that reduce arousal. They may reduce anxiety, increase sleep, slow breathing, and impair mental functioning.

Fentanyl (Fire, TNT, Dragon's Breath): A synthetic opioid that can be prescribed for severe pain or purchased illicitly. Fentanyl is commonly used to bulk up other illicit drugs and can be found in most heroin and cocaine. It can cause confusion, sedation, and respiratory depression. It can have severe side effect (loss of consciousness, stopping breathing) when combined with other substances.

Heroin (Dope, Snow): An opioid that can cause euphoria, respiratory depression, and constricted pupils. Heroin is more often than not cut with fentanyl, and the combination of the two drugs has been a large contributor to the overdose death rates.

Opioids: Opioids are chemicals that occur naturally such as morphine or are made in a laboratory (synthetic & semi-synthetic) such as heroin, oxycodone, and fentanyl. They can be prescribed by a doctor as a pain reliever or obtained illegally. Opioids can cause drowsiness, confusion, and respiratory depression. Both prescription and illicit opioids are addictive and can lead to overdose when overconsumed, even accidentally.

Stimulant: Stimulants are any substances that increase arousal. They may increase anxiety, mood, paranoia, and productivity.

Psychostimulant: Stimulants that particularly effect mood. The most commonly known psychostimulants are cocaine and methamphetamine.