



Majority of opioid overdose deaths in Australia are related to pharmaceutical opioids

EMBARGO: Not for release prior to 12.05am Monday August 20th 2018

There were 1,045 Australians aged 15-64 who died of an opioid overdose in 2016, according to a report released today by the National Drug and Alcohol Research Centre at UNSW Sydney. The majority of these deaths (76%) were attributable to pharmaceutical opioids. The report highlights an increase over the last ten years in opioid-induced deaths, from 3.8 to 6.6 deaths per 100,000 Australians from 2007 to 2016, respectively.

While the number and rate of amphetamine-induced deaths among Australians aged 15-64 is the highest observed since monitoring commenced (105 deaths, or 0.7 deaths per 100,000 Australians in 2016), it is still substantially lower than that recorded for opioids.

The report, *Opioid-, amphetamine-, and cocaine-induced deaths in Australia,* includes estimates from 1997 to 2016, with preliminary estimates for 2015 and 2016. Analyses of opioid-induced deaths showed:

- The highest rates of opioid-induced death in 2016 were for natural and semisynthetic opioids (e.g., morphine, oxycodone, codeine), with 3.1 deaths per 100,000 people (498 deaths).
- The rate of deaths attributed to heroin has been increasing over the last few years. In 2016 there were 2.2 deaths per 100,000 people (357 deaths) attributed to heroin (an increase from 0.9 in 2007).
- The rate of deaths attributed to synthetic opioids (e.g. tramadol and fentanyl) has also increased. There were 1.3 deaths per 100,000 people (214 deaths) in 2016, an increase from 0.11 per 100,000 in 2007.
- Nearly half (45%) of opioid-induced deaths in 2016 also recorded a benzodiazepine as contributing to the death (475 deaths), an increase relative to 2007 (from 35%).
- The rate of opioid-induced deaths was higher among males, and among those aged 35-44 years, with low rates recorded among the 15-24 age group. This has been a consistent trend.
- Most of the opioid-induced deaths were considered accidental (85%), with one-tenth recorded as intentional.

Dr Amy Peacock, program lead for Drug Trends at UNSW, said that the situation in Australia is different to North America. "Opioid overdoses in the US and Canada are increasing, but the rates they are observing are far higher and there is considerable evidence that illicit fentanyl is driving many of the deaths. Although we are carefully monitoring the situation in Australia, at the moment, there is little evidence to suggest that illicit fentanyl is playing a large part in our opioid overdoses" said Dr Peacock.

"One of the most important and effective strategies to reduce overdoses is increasing the availability of opioid substitution therapy for people who have developed opioid dependence and encouraging engagement and retention in this treatment. We need to ensure that this remains a key strategy in Australia."

"We also need to encourage Australians at risk of having or witnessing an overdose to carry and administer naloxone. This is available over-the-counter in pharmacies and easily administered to temporarily reverse the effects of an opioid overdose, allowing time to seek

medical help. The evidence from Australia and internationally to support the establishment of medically supervised injecting centres in areas where rates of overdose are particularly high also cannot be ignored."

"This situation of increasing deaths due to pharmaceutical opioids in Australia has generated a response in the policy space. State and federal governments are considering a range of strategies, rolling out prescription monitoring programmes and other interventions intended to reduce risky opioid prescribing."

About the report

This report covers the most recent and most detailed estimates of opioid-, amphetamine-, and cocaine-induced deaths in Australia, using data provided by the Australian Bureau of Statistics (ABS).

In addition to the report, there are new and unique online interactive data visualisations which are publicly accessible and can be used to look at different trends in drug-induced deaths, including by age, sex, and state/territory.

The full report and online interactive data visualisations are available <u>here</u> when the embargo lifts on **Monday August 20**th at 12.05am.

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Media contacts:

Marion Downey: (02) 9385 0333| 0401 713 850 | m.downey@unsw.edu.au