

Drug-overdose deaths hold steady in some high drug trafficking areas

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Areas in the U.S. with the highest drug-overdose death rates are not always places with high drug trafficking, according to a new University of Pittsburgh Graduate School of Public Health analysis published in the journal *Preventive Medicine*.

Drug-[overdose](#) mortality rates have increased an average of 6.7 percent per year since 1979 but held relatively steady in most U.S. border counties, indicating that drugs appear to pass through these counties without affecting the [death rates](#) of their residents.

"Our research reveals several potential new [drug overdose](#) problem regions that warrant careful attention as they may not correspond to areas covered by federal resources to combat drug trafficking," said lead author Jeanine Buchanich, Ph.D., deputy director of Pitt Public Health's Center for Occupational Biostatistics and Epidemiology. "Western Pennsylvania is one such area that is not considered to have high drug trafficking, but yet has one of the fastest growing drug overdose rates nationwide."

Using the Mortality and Population Data System, a unique repository and retrieval system for detailed death data from the National Center for Health Statistics, housed at Pitt Public Health, Dr. Buchanich and her team examined overdose deaths in the U.S. from 1979 to 2014. The team started with 1979 because changes in reporting cause of death make it impossible to make comparisons with previous years. 2014 is the most recent year for which data are available.

The counties with the largest increases in overdose death rates were clustered in southern Michigan; eastern Ohio and western Pennsylvania; eastern Pennsylvania, New Jersey and much of southeastern New York; and coastal New England.

Counties in the Midwest, California and Texas have seen little to no increase in overdose death rates.

The mortality data was cross-referenced with counties in the High Intensity Drug Trafficking Areas program, which was created by Congress in 1988 to provide 31 high [drug-trafficking](#) areas of the U.S. with coordinated law enforcement resources dedicated to reducing trafficking and production.

High Intensity Drug Trafficking Areas with high overdose death rates were mostly concentrated in Appalachia and the Southwest U.S., whereas such areas with lower death rates were near the borders in California, Texas and southern Florida.

"While resources are justifiably being targeted to the High Intensity Drug Trafficking Areas, they must also be allocated to counties outside those areas with rapidly increasing and currently high drug overdose rates," said Dr. Buchanich, also a research assistant professor in Pitt Public Health's Department of Biostatistics.

Pitt Public Health's Mortality and Population Data System also unveiled several demographic insights that could be used to guide prevention and drug intervention efforts, including that:

- Since 1979, death rates increased for all age groups, with the smallest rate of growth in those older than 65 and the largest in 45 to 54 year olds.
- In 1979, [overdose deaths](#) occurred most frequently among 25 to

34 year olds and blacks; in 2014, rates were highest among 45 to 54 year olds and whites.

- Mortality rates were slightly higher in urban counties than rural counties.
- Deaths due to overdose in women began increasing in the mid-1990s and increased dramatically in 2002; for men, the rates began climbing in the mid-1980s with a more rapid increase also beginning in 2002.

Dr. Buchanich will continue to build on her drug overdose research with funding from the Pitt Public Health opioid pilot grant program. These one-year pilot grant projects explore different areas of the opioid overdose epidemic with the goal of providing research-based information to guide [public health](#) interventions.

Provided by University of Pittsburgh Schools of the Health Sciences

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