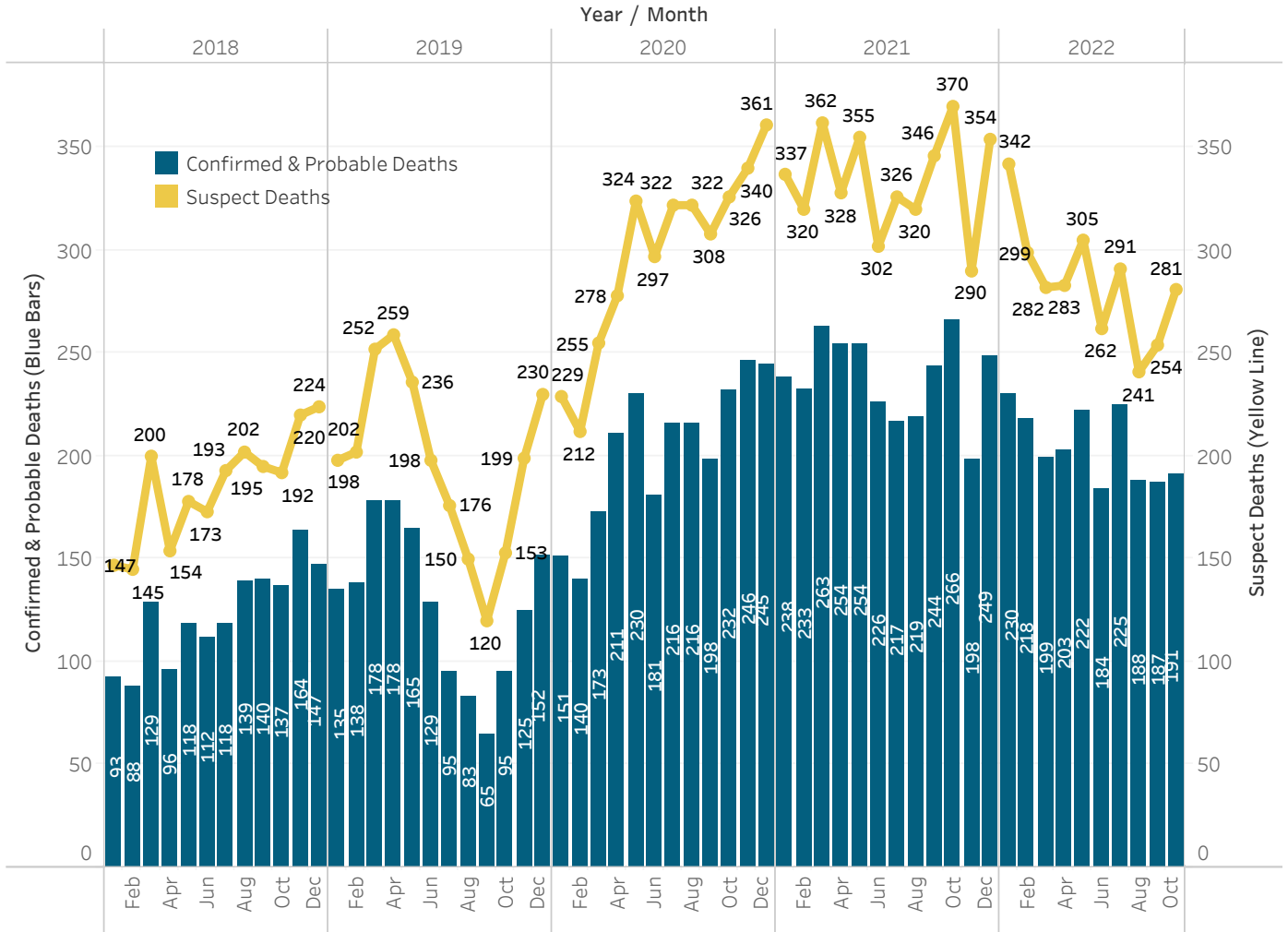


Opioid & Suspect Drug-Related Deaths Summaries (LGLDHU)

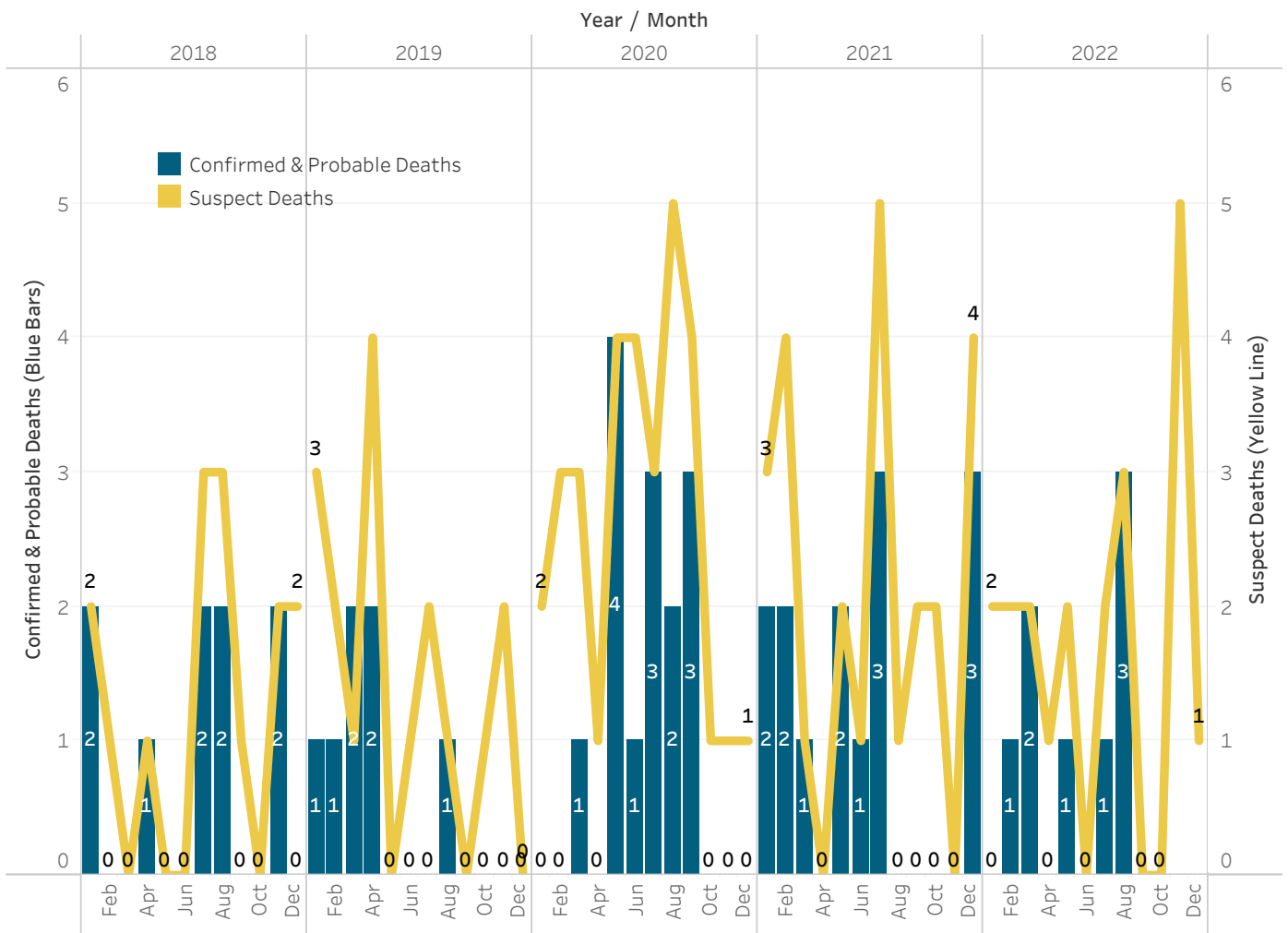
Confirmed & Probable Opioid-Related Deaths & Suspect Drug-Related Deaths (Ontario 2018-2022)

Updated | 2023-02-08 9:10:35 AM



Confirmed & Probable Opioid-Related Deaths & Suspect Drug-Related Deaths (LGLDHU 2018-2022)

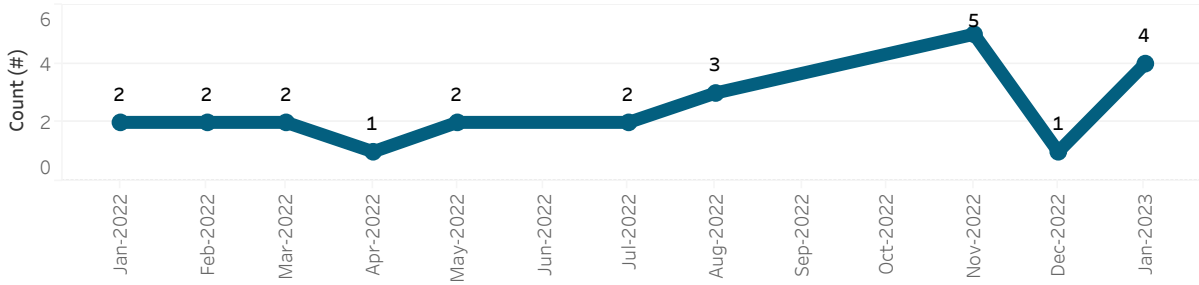
Updated | 2023-02-08 9:10:35 AM



Opioid & Suspect Drug-Related Deaths Summaries (LGLDHU)

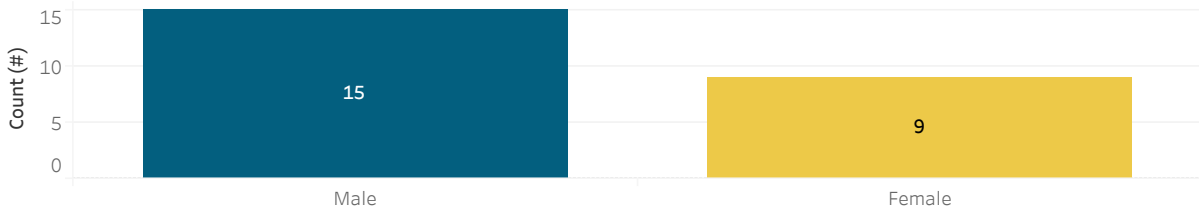
Suspect Drug-Related Death Counts by Month & Year (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



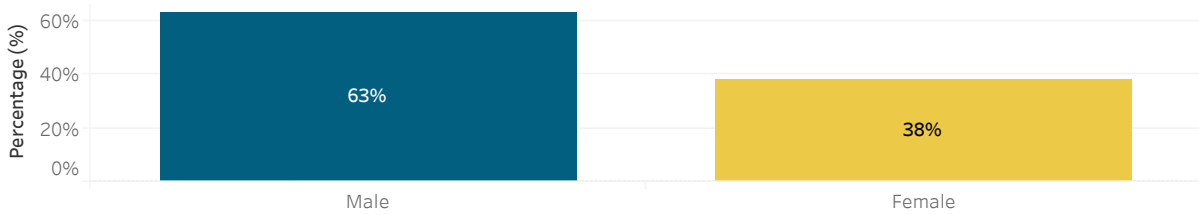
Suspect Drug-Related Death Counts by Sex (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



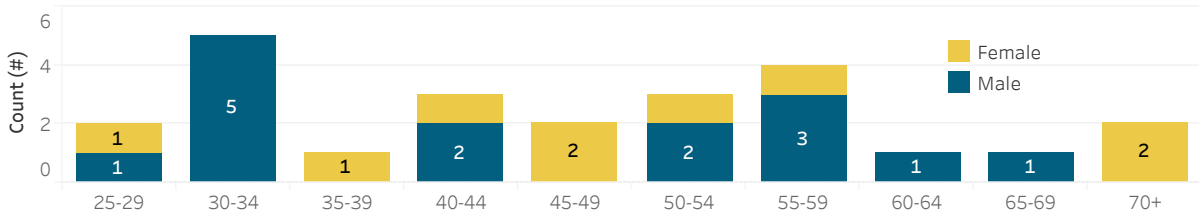
Suspect Drug-Related Death Proportions by Sex (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



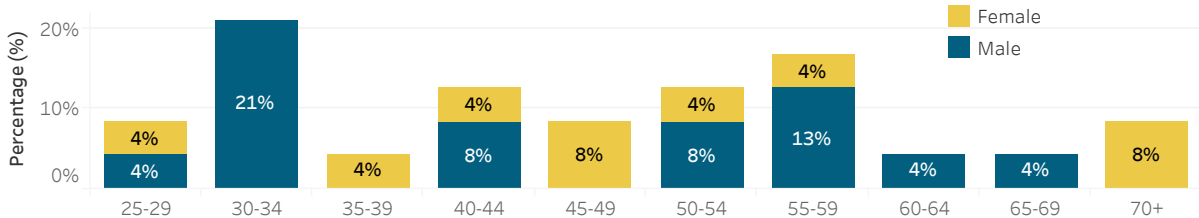
Suspect Drug-Related Death Counts by Age Group & Gender (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



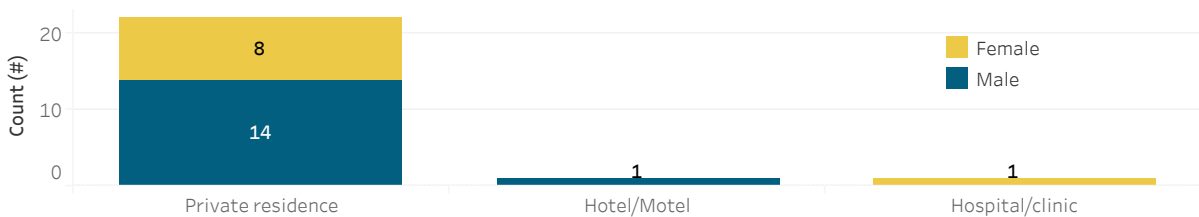
Suspect Drug-Related Death Proportions by Age Group & Gender (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



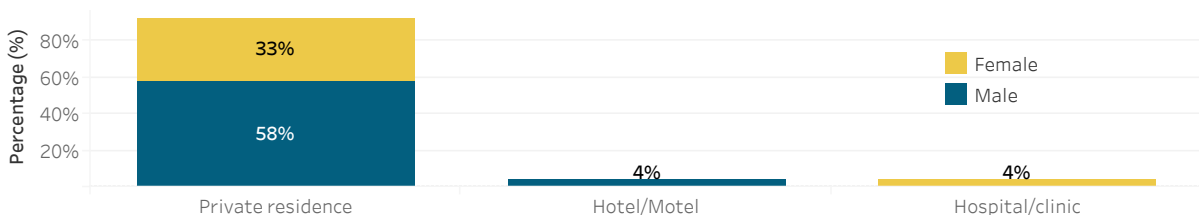
Suspect Drug-Related Death Counts by Setting (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



Suspect Drug-Related Death Proportions by Setting (LGLDHU 2022-2023)

Updated | 2023-02-08 8:44:55 AM



Data Notes

Purpose:

The purpose of this report is to provide an early signal of potential trends in drug-related deaths at a provincial and public health unit level. This is a syndromic surveillance approach where evidence from the scene/investigation or preliminary autopsy findings are used to define cases rather than toxicology results and conclusions on the cause of death in an effort to provide more timely data.

Context:

Under the authority of the Coroners Act, coroners in Ontario investigate almost all suspect drug-related deaths in Ontario. The Coroners Act also makes provision for sharing information held by the Death Investigation System (DIS) where the Chief Coroner is of the opinion that it is in the interests of public safety to so share. The information in this file is drawn from the DIS with the goal of supporting local efforts to reduce substance-related harms. It may reasonably be shared with partners and collaborators in the interests of public safety without further permission or process.

Although no personally identifying information is included in this file, it is possible that information herein may inadvertently harm persons who knew or were aware of the deaths described herein. All users of this information are requested to assess and manage this potential risk of harm in their particular context.

Case Definitions:

Confirmed opioid-related deaths are deaths for which a coroner or forensic pathologist determined the cause of death to be drug toxicity with opioid involvement. Conclusions on cause of death may take several months to become available. Please use confirmed + probable counts if reporting on trends in opioid-related deaths in the last 12 months.

Probable opioid-related deaths are suspect drug-related deaths where conclusions on cause of death are pending, and toxicology is positive for opioids. Toxicology results take ~3 months to become available.

Suspect-drug related deaths include deaths where the preliminary investigation by the investigating coroner indicated:

- Drugs were found at the scene
- Drug paraphernalia at the scene
- History of drug abuse
- History of naloxone use
- Physical sign of drug use
- Positional asphyxia
- Unresponsive with snoring prior to death

or

Preliminary findings from autopsy indicates a suspected drug intoxication

Excludes – Death associated with trauma and medical assistance in dying cases

If deaths initially thought to be drug related are determined to not be drug-related, they are not removed from the preliminary suspect drug related death count to maintain comparable baseline data for the most recent months.

Data Notes:

Investigations of suspect-drug related deaths may take several months, with identification of a number of death types, including: (1) opioid; (2) non-opioid acute drug toxicity, or (3) natural deaths (e.g. cardiac events), with different manners of death (natural, suicide, accident).

When deaths initially thought to be drug related are determined to be natural deaths, this death is not removed from the preliminary suspected drug related death count to maintain comparable baseline data for the most recent months.

Geographic regions are assigned based primarily on location of incident, however due to delays in data entry, may not yet be assigned for some recent deaths. Data will be updated as it becomes available.

Data are preliminary and subject to change.

There is a ~3-month lag in reporting for opioid-related deaths.

Source:

Office of the Chief Coroner of Ontario