



MIDDLESEX-LONDON HEALTH UNIT

REPORT NO. 58-23

TO: Chair and Members of the Board of Health

FROM: Dr. Alexander Summers, Medical Officer of Health
Emily Williams, Chief Executive Officer

DATE: 2023 October 19

OPIOID CRISIS UPDATE - 2023

Recommendation

It is recommended that the Board of Health receive Report No. 58-23 re: “Opioid Crisis Update-2023” for information.

Key Points

- According to a new [report](#) from the Ontario Drug Policy Research Network and Public Health Ontario (2023), the number of individuals dying from multiple toxic substances has increased since the start of the pandemic.
- Opioid poisonings and opioid-related toxicity deaths in Middlesex-London have continued to escalate from 2017 through to December 2022.
- In the Middlesex-London region, visits to local EDs related to opioid toxicity increased by 92%, from 37 in January 2020 to 71 in December 2022, peaking in July 2021 (121).
- From January to September 2022, the rate of opioid-related deaths in the Middlesex-London region ranged from 14 to 30 deaths per 100,000 population and exceeded the provincial rate in six of nine months.
- In 2022 there were over 99,000 doses of naloxone distributed in the Middlesex-London region.
- The Middlesex-London Health Unit (MLHU), the local Opioid Working Group, and many community partners continue to work together to minimize the adverse effects of the opioid crisis.

Background

Opioid poisonings continue to be a significant public health threat in the Middlesex-London region. According to a recent [report](#) from the Ontario Drug Policy Research Network and Public Health Ontario (2023), “polysubstance use and the adulteration of drug supplies can complicate healthcare responses, particularly when multiple sedating substances are used together, contributing to increasing fatalities in the Canadian population.” The report goes on to state that from the declaration of the COVID-19 pandemic emergency in March 2020 through to 2021, deaths due to accidental alcohol and drug toxicities increased 37%, disproportionately occurring among younger populations. Most of the deaths were attributable to opioid poisoning where the fentanyl was obtained from an unregulated drug supply.

Population Health Assessment

[Appendix A](#) shows data from the Public Health Ontario (PHO) [Interactive Opioid Tool](#) for the Middlesex-London region. It includes data from 2017 when the local opioid crisis was declared, until December 2022 which has the most recently available data. Prior to the start of the COVID-19 pandemic, the number and rate of both opioid-related emergency department (ED) visits and deaths had been increasing across Ontario and in the Middlesex-London region.

Unfortunately, these patterns of increased ED visits and deaths continued once the COVID-19 pandemic began in 2020. Figure 1 ([Appendix A](#)) shows that opioid-related ED visits in Ontario increased by 30% between January 2020 and December 2022, from 757 to 985 visits, peaking in August 2021 (1729). In the Middlesex-London region, the increase in opioid toxicity ED visits was even more dramatic. Visits to local EDs increased by 92%, from 37 in January 2020 to 71 in December 2022, peaking in July 2021 (121).

Opioid-related toxicity deaths have also continued to increase in Ontario since the beginning of the COVID-19 pandemic. Figure 1 ([Appendix A](#)) shows that there was a 31% increase in deaths across the province between January 2020 and September 2022, from 154 deaths to 202 deaths. Locally, the number of opioid-related toxicity deaths also shows signs of increase since the start of the pandemic. In 2020, there was an average of nine opioid-toxicity deaths reported each month. This increased by 29% in 2021 to an average of 11 deaths per month. Based on the data available for 2022 (January to September), the number of deaths appears to have returned to 2020 levels with an average of nine deaths per month.

Figure 2 ([Appendix A](#)) shows that since mid-2017, the rates of opioid-related ED visits in the Middlesex-London region have consistently exceeded the Ontario rate. Through 2022, local rates ranged from 110 to 150 ED visits per month per 100,000 population. From January to September 2022, the rate of opioid-related deaths in the Middlesex-London region ranged from 14 to 30 deaths per 100,000 population and exceeded the provincial rate in six of nine months.

Local Interventions

Through the delivery of many community-based interventions, the MLHU, the local Opioid Working Group, and many community partners continue to work together to help minimize the adverse effects of the opioid crisis, including opioid toxicity, other negative outcomes, and death.

The Needle Syringe Program (NSP) provides individuals with a place to return drug-use equipment and pick-up new sterile equipment. Currently there are up to 28 access points in Middlesex-London including a mobile unit, satellite locations, pharmacies, a large, fixed site at Regional HIV/AIDS Connection (RHAC), and a location at the MLHU's CitiPlaza location. There are 23 needle disposal bins for the public to access, as well as City of London Dispatch available 24/7 for public needle pick-up. In 2022, there were 1.7 million syringes distributed.

The naloxone distribution program provides life-saving naloxone which can reverse an opioid overdose. There are 43 eligible community organizations that distribute naloxone in Middlesex-London, including: police and fire services, First Nations community health centres, shelters, outreach teams, Carepoint Consumption and Treatment Services (CTS), treatment management programs, and community health centres. Based on reports provided by community partners to MLHU, 10,035 naloxone kits were distributed in 2022, in addition to 89,405 kits by local pharmacies. There were over 500 reported reversals of overdoses.

International Overdose Awareness Day is recognized annually on August 31st to end overdose and to remember, without stigma, those who have died from overdose. This year, the focus was to encourage individuals to use social media to honour families, friends, healthcare workers and first responders whose lives have been altered by overdose. The Middlesex-London Health Unit's Outreach Team, Carepoint Consumption and Treatment Service, and the Health Unit's Needle Syringe Program distributed care bags to people struggling with addiction. The care bags included granola bars and clean socks.

Consumption and Treatment Services (CTS) in London, operated by the Regional HIV/AIDS Connection (RHAC), continues to provide an essential service to reduce harms associated with drug use, including opioid-related overdoses. The permanent location opened February 27, 2023 and offers wrap around supports and referrals such as housing, primary care, addiction services, mental health, wound care, and testing. In 2022 there were 13,786 visits, 10,958 soft referrals, and 150 overdoses.

Local Drug Alerts are issued as part of an Early Warning System to share with community partners and those at risk for opioid poisoning. The alerts are issued when there is a sudden and disproportionate increase in overdoses. The alerts often consist of information about the toxic drug circulating in the community, identifying the drug mix of concern. The alerts are primarily issued by RHAC to community partners for subsequent sharing with clients, prompting an increase in access to and orders for naloxone kits. If the Health Unit receives notice about an anecdotal increase in overdoses within the community, this information is cross-referenced with ACES (Acute Care Enhanced Surveillance) data to prompt the issuance of an alert. In 2022, there were 5 drug alerts issued.

The Safer Opioid Supply (SOS) Program, located at London InterCommunity Health Centre (LIHC), was started in 2016, and was the country's first prescribed safer opioid supply program. The SOS Program aims to reduce health risks associated with drug use and prevent opioid-related toxicity deaths. The program involves the provision of a supply of prescribed opioid medication in combination with comprehensive primary healthcare and social services specific to each client. Funded through Health Canada, LIHC is supporting 274 clients at present. Documented program outcomes from the [September 2023 Evaluation Report](#) include client-reported reductions in fentanyl and stimulant use, and improvements to physical and mental health.

The Community Drug and Alcohol Strategy (CDAS) is a locally developed long-term strategy aimed at preventing and addressing substance use-related harms in the Middlesex-London community. Launched in 2018, the Strategy is the result of the expertise and collaboration of local partners as well as the diverse voices of hundreds of citizens invested in the health and wellness of Middlesex-London. The CDAS is based on broad community actions toward shared goals and a "Four Pillars" approach of prevention, treatment, harm reduction and enforcement, with a focus on all substances. Leadership around the CDAS Steering Committee table is assessing the status of the proposed community actions and identifying some potential priority areas for future collective action.

Next Steps

Opioid poisonings and deaths have continued to escalate beyond the COVID-19 pandemic. The use of multiple substances combined with the adulteration of the drug supply is complicating the treatment of overdoses, contributing to increased fatalities. There is a continued need for community-based treatment and harm reduction interventions, community collaboration, and upstream prevention to reduce opioid poisonings in the Middlesex-London region. Additionally, there is also a need to expand healthcare and community-based interventions to address multiple concurrent substance use disorders. The MLHU staff will continue to work with and learn from our community partners and people with lived experience to guide and support collective community action.

This report was prepared by the Environmental Health and Infectious Disease Division, the Healthy Living Division, and the Public Health Foundations Division.



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