



NCHS Data on Drug-poisoning Deaths

About NCHS

The National Center for Health Statistics (NCHS) is the nation's principal health statistics agency, providing data to identify and address health issues. NCHS compiles statistical information to help guide public health and health policy decisions.

Collaborating with other public and private health partners, NCHS employs a variety of data collection mechanisms to obtain accurate information from multiple sources. This process provides a broad perspective to help us understand the population's health, influences on health, and health outcomes.

NCHS Drug-poisoning Data

Poisoning is the leading cause of injury death in the United States. Drugs—both pharmaceutical and illicit—cause the vast majority of poisoning deaths.

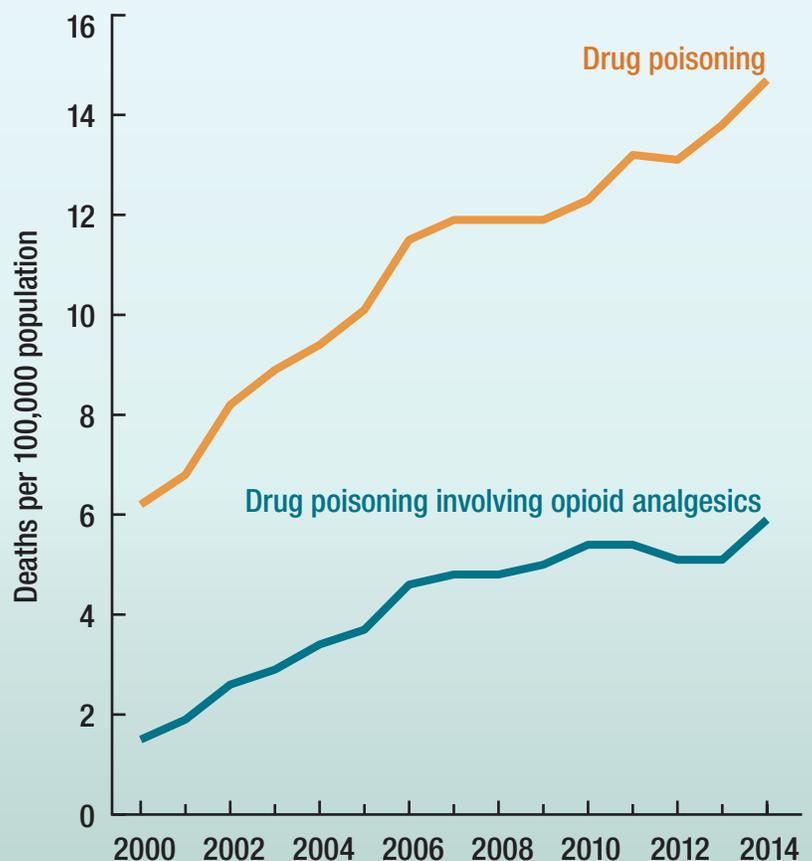
NCHS uses the National Vital Statistics System (NVSS) to monitor deaths due to drug poisoning. NVSS collects and compiles mortality information from death certificates in all 50 states and the District of Columbia. NCHS identifies the number of drug-poisoning deaths from the underlying cause of death section on death certificates. Multiple causes of death are used to identify the drugs involved. In 2014, approximately 19% of death certificates for drug-poisoning deaths lacked information on the specific drugs involved.

Hydrocodone, morphine, and oxycodone are examples of natural and semisynthetic opioid analgesics. Fentanyl—which can be manufactured illicitly—and methadone are examples of synthetic opioid analgesics.

Recent Findings

- Since 2000, the age-adjusted drug-poisoning death rate more than doubled, from 6.2 per 100,000 in 2000 to 14.7 per 100,000 in 2014.
- In 2014, 47,055 deaths involved drug poisoning. Of these, 82% were unintentional, 12% were suicides, and 6% were of undetermined intent.
- In 2014, 40% of drug-poisoning deaths involved opioid analgesics (18,893 deaths).
- The age-adjusted rate for deaths involving opioid analgesics nearly quadrupled, from 1.5 per 100,000 in 2000 to 5.9 per 100,000 in 2014.
- In 2014, nearly 65% of all deaths from opioid analgesics involved natural and semisynthetic opioid analgesics, such as hydrocodone, morphine, and oxycodone.

Drug-poisoning and opioid-analgesic poisoning death rates: United States, 2000–2014



SOURCE: CDC/NCHS, National Vital Statistics System, 2000–2014.

Who is most at risk?

From 2000 through 2014, the drug-poisoning death rate per 100,000 population increased for many demographic groups.

Sex

- From 2000 to 2014, drug-poisoning death rates increased 2.7-fold for females and 2.2-fold for males.
- In 2014, the age-adjusted rate for drug-poisoning deaths for males (18.3 per 100,000) was 1.6 times that of females (11.1).

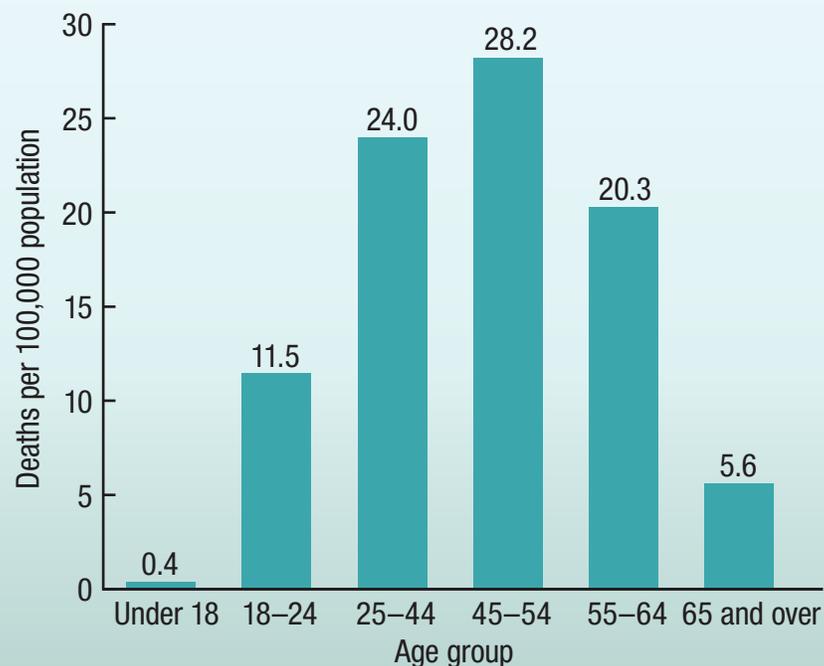
Race and ethnicity

- From 2000 to 2014, drug-poisoning death rates nearly tripled for non-Hispanic white persons and increased 1.4-fold for non-Hispanic black persons and for Hispanic persons.
- In 2014, the age-adjusted drug-poisoning death rate was 19.0 for non-Hispanic white persons, 10.5 for non-Hispanic black persons, and 6.7 for Hispanic persons.

Age groups

- The drug-poisoning death rate is highest for adults aged 45–54.

Drug-poisoning death rates, by age: United States, 2014



SOURCE: CDC/NCHS, National Vital Statistics System, 2014.

Drug-poisoning death rates by state

Deaths per 100,000 population varied by state. The five states with the highest drug-poisoning death rates were West Virginia (35.5), New Mexico (27.3), New Hampshire (26.2), Kentucky (24.7), and Ohio (24.6).

Drug-poisoning death rates, by state: United States, 2014

