Drug Abuse Warning Network, 2005: Area Profiles of Drug-Related Mortality

U.S. Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Office of Applied Studies

ACKNOWLEDGMENTS

This report was prepared by the Office of Applied Studies (OAS), Substance Abuse and Mental Health Services Administration (SAMHSA), and by RTI International (a trade name of Research Triangle Institute, Research Triangle Park, NC). Work by RTI was performed under contract number 280-03-2602. The co-authors are Judy K. Ball, Ph.D., M.P.A., previously of SAMHSA, and Victoria A. Albright, RTI.

PUBLIC DOMAIN NOTICE

All material appearing in this report is in the public domain and may be reproduced or copied without permission from SAMHSA. Citation of the source is appreciated. However, this publication may not be reproduced or distributed for a fee without the specific, written authorization of the Office of Communications, SAMHSA, U.S. Department of Health and Human Services.

RECOMMENDED CITATION

Ball, J., & Albright, V., *Drug Abuse Warning Network, 2005: Area Profiles of Drug-Related Mortality*. Rockville, MD: Office of Applied Studies, Substance Abuse and Mental Health Services Administration, 2009.

ELECTRONIC ACCESS AND COPIES OF PUBLICATION

This publication may be downloaded from http://DAWNinfo.samhsa.gov or from http://oas.samhsa.gov.

Or, please call SAMHSA's Health Information Network at:

1-877-SAMHSA-7 (1-877-726-4727) (English and Español).

ORIGINATING OFFICE

Office of Applied Studies
Substance Abuse and Mental Health Services Administration
1 Choke Cherry Road, Rockville, MD 20857

March 2009

CONTENTS

	Page
Acknowledgments	2
DAWN Mortality Data	7
Drug-related deaths	7
Drugs	8
Deaths included in this publication	8
Standardized death rates	9
Participation in DAWN 2005	11
Summary of Findings	15
Profiles and Spotlights	19
Full profiles	22
Limitations to data	27
Abbreviated profiles for selected metropolitan areas	27
Spotlights	28
State profiles	28
State Profiles	
Maine	30
Maryland	32
Massachusetts	34
New Hamphire	36
New Mexico	38
Oklahoma	
Utah	44
Vermont	46
Metropolitan Area Profiles	
Albuquerque, NM	50
Atlanta-Sandy Springs-Marietta, GA	52
Baltimore-Towson, MD	54
Barnstable Town, MA	56
Birmingham-Hoover, AL	58
Boston-Cambridge-Quincy, MA-NH	60
Buffalo-Niagara Falls, NY	62
Burlington-South Burlington, VT	64
Chicago-Naperville-Joliet, IL-IN-WI	
Cleveland-Elyria-Mentor, OH	68

CONTENTS (CONTINUED)

		Page
	Denver-Aurora, CO	70
	Detroit-Warren-Livonia, MI	72
	Houston-Sugar Land-Baytown, TX	74
	Indianapolis-Carmel, IN	76
	Kansas City, MO-KS	78
	Los Angeles-Long Beach-Santa Ana, CA	80
	Louisville-Jefferson County, KY-IN	82
	Milwaukee-Waukesha-West Allis, WI	84
	Minneapolis-St. Paul-Bloomington, MN-WI	86
	New York-Northern New Jersey-Long Island, NY-NJ-PA	88
	Ogden-Clearfield, UT	90
	Oklahoma City, OK	92
	Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	94
	Phoenix-Mesa-Scottsdale, AZ	96
	Pittsburgh, PA	98
	Portland-South Portland-Biddeford, ME	100
	Portland-Vancouver-Beaverton, OR-WA	102
	Provo-Orem, UT	104
	Salt Lake City, UT	106
	San Diego-Carlsbad-San Marcos, CA	108
	Seattle-Tacoma-Bellevue, WA	110
	Springfield, MA	112
	St. Louis, MO-IL	114
	Tulsa, OK	116
	Washington-Arlington-Alexandria, DC-VA-MD-WV	118
	Worcester, MA	120
Αk	obreviated Profiles for Areas With Few Drug-Related Deaths	
	Bangor, ME	124
	Fargo, ND-MN	124
	Farmington, NM	125
	Las Cruces, NM	125
	Lawton, OK	126
	Lewiston-Auburn, ME	126
	Manchester-Nashua, NH	127
	Pittsfield, MA	127
	Salisbury, MD	128
	Santa Fe, NM	128
	Sioux Falls, SD	129
	St. George, UT	129

CONTENTS (CONTINUED)

	Page
Abbreviated Profiles for Areas With Less Than 50% Population Coverage	
Dallas-Fort Worth-Arlington, TX	132
New Orleans-Metairie-Kenner, LA (Pre-Katrina)	132
San Francisco-Oakland-Fremont, CA	133
Area Spotlights	
Albuquerque, NM: Bernalillo County, NM	136
Atlanta-Sandy Springs-Marietta, GA: Fulton County, GA	137
Baltimore-Towson, MD: Baltimore City, MD	138
Baltimore-Towson, MD: Baltimore County, MD	139
Boston-Cambridge-Quincy, MA-NH: Essex County, MA	140
Boston-Cambridge-Quincy, MA-NH: Middlesex County, MA	141
Boston-Cambridge-Quincy, MA-NH: Norfolk County, MA	142
Boston-Cambridge-Quincy, MA-NH: Plymouth County, MA	143
Boston-Cambridge-Quincy, MA-NH: Suffolk County, MA	144
Buffalo-Niagara Falls, NY: Erie County, NY	145
Chicago-Naperville-Joliet, IL-IN-WI: Cook County, IL	146
Chicago-Naperville-Joliet, IL-IN-WI: Lake County, IL	147
Denver-Aurora, CO: Adams County, CO	148
Denver-Aurora, CO: Denver County, CO	149
Detroit-Warren-Livonia, MI: Macomb County, MI	150
Detroit-Warren-Livonia, MI: Oakland County, MI	151
Detroit-Warren-Livonia, MI: Wayne County, MI	152
Kansas City, MO-KS: Jackson County, MO	153
Minneapolis-St. Paul-Bloomington, MN-WI: Hennepin County, MN	154
New Orleans-Metairie-Kenner, LA (Pre-Katrina): Jefferson Parish, LA	155
New Orleans-Metairie-Kenner, LA (Post-Katrina): Jefferson Parish, LA	156
New York-Northern New Jersey-Long Island, NY-NJ-PA: Bronx County, NY	157
New York-Northern New Jersey-Long Island, NY-NJ-PA: Kings County, NY	158
New York-Northern New Jersey-Long Island, NY-NJ-PA: New York County, NY	159
New York-Northern New Jersey-Long Island, NY-NJ-PA: Queens County, NY	160
New York-Northern New Jersey-Long Island, NY-NJ-PA: Suffolk County, NY	161
Philadelphia-Camden-Wilmington, PA-NJ-DE-MD: Delaware County, PA	162
Philadelphia-Camden-Wilmington, PA-NJ-DE-MD: Philadelphia County, PA	163
Portland-Vancouver-Beaverton, OR-WA: Multnomah County, OR	164
Provo-Orem, UT: Utah County, UT	165
Salt Lake City, UT: Salt Lake County, UT	166
San Francisco-Oakland-Fremont, CA: San Mateo County, CA	167
Seattle-Tacoma-Bellevue, WA: King County, WA	168
Seattle-Tacoma-Bellevue. WA: Snohomish County. WA	169

CONTENTS (CONTINUED)

			Page
	Springfield	d, MA: Hampden County, MA	170
	St. Louis, N	MO-IL: St. Louis City, MO	171
	St. Louis, N	MO-IL: St. Louis County, MO	172
	Tulsa, OK:	Tulsa County, OK	173
	Washingto	on-Arlington-Alexandria, DC-VA-MD-WV: District of Columbia	174
Li	st of Table	s	
	Table 1.	Participation of medical examiner/coroner jurisdictions in DAWN, 2005	12
	Table 2.	Rates of drug-related deaths and drug-related suicide deaths per	
	•	100,000 population, 2005	15
	Table 3.	Rates of drug-related deaths and percentage change, 2004 and 2005	17
	Table 4.	Metropolitan area profiles and county spotlights	20
	Table 5.	State profiles and metropolitan area profiles wholly in those States	22
Li	st of Figur	res	
	Figure 1.	Sample metropolitan area profile layout	23
	Figure A-1	. DAWN case form	179
	Figure A-2	. DAWN decision tree	180
Li	st of Appe	ndixes	
	Appendix A	A: DAWN Mortality Data Collection	177
	Appendix	B: Glossary of Terms	183
	Appendix	C: Multum Lexicon End-User License Agreement	189

DAWN MORTALITY DATA

he Drug Abuse Warning Network (DAWN) is a public health surveillance system that monitors drug-related deaths referred to medical examiners and coroners (ME/Cs) in selected metropolitan areas and States. Findings in this publication reflect data on drug-related deaths that occurred during calendar year 2005 and were reported by participating ME/Cs to DAWN. In selected tables, data from reporting year 2004 are included for comparison. The Office of Applied Studies (OAS) of the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services, is responsible for DAWN.

The mortality component of DAWN does not rely on a statistical sample of ME/Cs. Findings cannot be considered representative of ME/Cs that did not participate, and results cannot be extrapolated to the United States as a whole. DAWN mortality data for 2003 and later are not comparable to mortality data for any years prior to 2003 because of changes introduced in the 2003 reporting year.

Drug-related deaths

Since 2003, a DAWN case is any death reviewed by an ME/C that was related to recent drug use. Findings in this publication pertain to drug-related deaths and drug-related suicide deaths reported by participating death investigation jurisdictions as DAWN cases.¹

DAWN cases are identified through a retrospective review of decedent case files in each participating death investigation jurisdiction. A DAWN case is any death that is determined by the ME/C as being related to drug use. The relationship between the death and the drug need not be causal; the drug need only be implicated in the death. The drug use may have been for legitimate, therapeutic purposes or for the purpose of drug abuse/misuse, but in either case, the drug use must have been recent.

These eligibility criteria for a DAWN case are intentionally broad and inclusive. Since death record documentation varies in clarity and comprehensiveness across jurisdictions, broad criteria reduce the potential for judgment calls that could cause data to vary systematically and unexpectedly across reporters and jurisdictions. Broad criteria also capture a diverse set of drug-related deaths that support a wide variety of analytical purposes and interests.

For decedents under the age of 21, DAWN cases include deaths where the only drug involved was alcohol. For those 21 or older, there must be at least one other drug involved besides alcohol for the death to be a DAWN case.

The data items submitted on drug-related deaths are listed in Appendix A.

¹ DAWN uses the terms "death investigation jurisdiction" (or, simply, "jurisdiction") and "county" interchangeably because ME/Cs' offices are typically organized by county. The one exception occurs in Niagara County, NY, which is divided into four districts. For reporting purposes, the four districts that make up Niagara County, NY, are treated collectively as a single jurisdiction.

Drugs

Drugs that make a death eligible for DAWN include:

- Illegal or illicit drugs, such as heroin, cocaine, marijuana, and Ecstasy;
- Prescription drugs, such as Prozac[®], Vicodin[®], OxyContin[®], alprazolam, and methylphenidate;
- Over-the-counter (OTC) medications, including aspirin, acetaminophen, ibuprofen, and multi-ingredient cough and cold remedies;
- Dietary supplements, including vitamins, herbal remedies, and nutritional products;
- Psychoactive, nonpharmaceutical inhalants;²
- Alcohol in combination with other drugs; and
- For those under age 21, alcohol without any other drug.

Deaths included in this publication

Findings in this publication focus on two major categories of drug-related deaths, based on the manner of death as determined by the ME/C.

- (1) Drug-related deaths (other than drug-related suicide deaths) include the following:
- Natural or accidental deaths with drug involvement. This category captures deaths involving medical use, nonmedical use, overuse, and misuse of prescription and OTC medications and drug abuse.³
- Homicide by drug. This category was designed to capture malicious poisonings; that is, the decedent was administered a drug by another person for a malicious purpose.
- Deaths with drug involvement when manner of death denoted by the ME/C was "could not be determined" (CNBD). This manner of death is assigned by the ME/C when a definitive ruling of suicide, homicide, natural, or accidental death is not possible.
- (2) Drug-related suicide deaths include suicide deaths with drug involvement. The determination of suicide is made by the ME/C. Because of the broad eligibility criteria for determining DAWN cases, drug-related suicide deaths include more than deaths due to overdoses. A reported drug may not be the cause of the suicide death even if only one drug was involved.

Findings reported in this publication are based on concluded investigations that were submitted by May 18, 2006, for deaths that occurred during 2005. Death investigations that were not concluded by the ME/C by the end of the data collection period are excluded.

² To be reportable, a nonpharmaceutical substance must be consumed by inhalation, sniffing, or snorting and must have a psychoactive effect when inhaled. A death involving inhalation of a nonpharmaceutical, psychoactive substance and no other drug qualifies as a DAWN case. Carbon monoxide is excluded from the inhalants reportable to DAWN.

³ Accidental death, a manner of death assigned by an ME/C, is not synonymous with accidental ingestion, a category used by DAWN to classify drug-related deaths from 2003 to 2005.

Standardized death rates

Death rates (i.e., the number of deaths per 100,000 population) are reported to permit comparisons within or across areas or across demographic subgroups.⁴ This use of death rates, as opposed to counts, is important because two areas with similar numbers of drug-related deaths may have vastly different populations. Rates, which take population differences into account, standardized these comparisons.

Readers are cautioned, though, in drawing conclusions based on comparisons of death rates. While differences in rates may signify differences in underlying drug-related mortality (or a lack of differences may suggest similarity), other factors may confound such comparisons. For example, State laws dictate which deaths are subject to ME/C review. These laws vary by State and, within each State, by time. Within ME/C offices, toxicology testing practices vary depending on local concerns, funding, and testing technology. Such factors will affect the number of deaths determined to be DAWN cases and the number of deaths attributed to particular drugs. Small changes in the number of deaths (i.e., an increase of 5 deaths) can result in a large percentage difference if the base is small (i.e., an increase of 5 to 10 deaths is a 100% increase). Even though there is no sampling error in DAWN ME/C data, the possibility of nonsampling errors (i.e., errors in reporting, changes in testing protocols) suggests that caution should be observed in assigning importance to such findings.

⁴ Beginning with the 2005 data year, rates are expressed as the number of deaths per 100,000 population, the metric most commonly used in public health surveillance. In prior years, rates were scaled according to the number of deaths per 1,000,000 population.

PARTICIPATION IN DAWN 2005

AWN relies on the voluntary cooperation of ME/Cs in selected areas of the United States to provide standardized data on drug-related deaths. For 2005, 169 jurisdictions in 51 metropolitan areas and 217 jurisdictions in 8 States submitted mortality data to DAWN.⁵ Metropolitan area definitions used by DAWN for 2003 and later years are those established by the Office of Management and Budget (OMB). (See Appendix A for additional detail.)

Table 1 provides information on the metropolitan areas and States that participated in 2005. It includes the following:

- Name of metropolitan area,
- Total number of death investigation jurisdictions (counties) in the area,
- Number and percentage of eligible counties for which mortality data were reported to DAWN, and
- Number and percentage of the area's population that is covered by DAWN-participating jurisdictions.

An awareness of the extent of DAWN's coverage within a given area is essential to an accurate interpretation of DAWN mortality data. ME/C participants in DAWN are not part of a scientific sample at either the metropolitan or the national level. Within a metropolitan area, findings based on participating jurisdictions are not representative of nonparticipating jurisdictions. Reports from only a portion of jurisdictions within a metropolitan area can be extrapolated neither to the metropolitan area as a whole nor to the nation as a whole.⁶

While the data do not support any representations at a national level, some generalizations can be made at a metropolitan level even if some ME/Cs do not participate. For example, while only 1 (10%) of the 10 counties that comprise the Houston, TX, metropolitan area participated in DAWN in 2005, that county is home to 70 percent of the area's total population. The important consideration is population coverage, not ME/C participation, per se.

Among the metropolitan areas listed in Table 1, population coverage exceeded 90 percent in 29 metropolitan areas, with 100 percent coverage in 25 of those areas. The remaining metropolitan areas had response rates that range from a low of 21 percent in Dallas-Fort Worth-Arlington to 85 percent in Chicago-Naperville-Joliet. Population coverage below 50 percent usually equates to the absence of large jurisdictions.

⁵ There is overlap between the metropolitan areas and States. In total, usable reports were received from 318 jurisdictions: 101 are only in metropolitan areas, 149 are only in States, and 68 are in both.

⁶ Recruitment efforts to increase participation by ME/Cs are ongoing. However, there are no plans to make the mortality component of DAWN national in scope.

Table 1
Participation of medical examiner/coroner jurisdictions in DAWN, 2005

		Participating jurisdictions (counties)		DAWN coverage	
Area	Total jurisdictions (counties)	Number	Percent of total	Population	Percent of area populatio
Fifty-one metropolitan areas	322	169	52%	92,443,457	72%
Eight States	217	217	100%	23,190,564	100%
Light States		opolitan areas		23,130,304	100 /0
Albuquerque, NM	4	4	100%	797,517	100%
Atlanta-Sandy Springs-Marietta, GA	28	8	29%	3,248,432	65%
Baltimore-Towson, MD	7	7	100%	2,651,069	100%
Bangor, ME	1	1	100%	146,817	100%
Barnstable Town, MA	1	1	100%	226,161	100%
Birmingham-Hoover, AL	7	1	14%	656,014	60%
Boston-Cambridge-Quincy, MA-NH	7	7	100%	4,448,884	100%
Buffalo-Niagara Falls, NY	2	2	100%	1,144,796	100%
Burlington-South Burlington, VT	3	3	100%	205,222	100%
Chicago-Naperville-Joliet, IL-IN-WI	14	8	57%	8,007,898	85%
Cleveland-Elyria-Mentor, OH	5	1	20%	1,330,428	63%
Dallas-Fort Worth-Arlington, TX	12	2	17%	1,215,920	21%
Denver-Aurora, CO	10	6	60%	2,287,309	97%
Detroit-Warren-Livonia, MI	6	4	67%	4,204,630	94%
Fargo, ND-MN	2	1	50%	130,455	71%
Farmington, NM	1	1	100%	125,820	100%
Houston-Sugar Land-Baytown, TX	10	1	10%	3,762,844	70%
Indianapolis-Carmel, IN	10	2	20%	991,583	60%
Kansas City, MO-KS	15	4	27%	1,039,655	53%
Las Cruces, NM	1	1	100%	189,306	100%
Lawton, OK	1	1	100%	110,629	100%
Lewiston-Auburn, ME	1	1	100%	107,061	100%
Los Angeles-Long Beach-Santa Ana, CA	2	1	50%	9,941,197	77%
Louisville-Jefferson County, KY-IN	13	1	8%	699,051	58%
Manchester-Nashua, NH	1	1	100%	400,516	100%
Milwaukee-Waukesha-West Allis, WI	4	1	25%	918,673	61%
Minneapolis-St. Paul-Bloomington, MN-WI	13	7	54%	1,832,939	58%
New Orleans-Metairie-Kenner, LA	7	3	43%	547,753	42%
New York-Northern New Jersey- Long Island, NY-NJ-PA	23	10	43%	11,101,883	59%
Ogden-Clearfield, UT	3	3	100%	486,428	100%
Oklahoma City, OK	7	7	100%	1,154,991	100%
Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	11	5	45%	3,005,026	52%

Table 1 (continued)
Participation of medical examiner/coroner jurisdictions in DAWN, 2005

	Participating jurisdictions (counties)		DAWN coverage		
Area	Total jurisdictions (counties)	Number	Percent of total	Population	Percent of area population
Phoenix-Mesa-Scottsdale, AZ	2	1	50%	3,638,481	94%
Pittsburgh, PA	7	1	14%	1,233,036	52%
Pittsfield, MA	1	1	100%	131,783	100%
Portland-South Portland-Biddeford, ME	3	3	100%	512,992	100%
Portland-Vancouver-Beaverton, OR-WA	7	3	43%	1,541,920	74%
Provo-Orem, UT	2	2	100%	461,020	100%
Salisbury, MD	2	2	100%	115,918	100%
Salt Lake City, UT	3	3	100%	1,046,685	100%
San Diego-Carlsbad-San Marcos, CA	1	1	100%	2,936,609	100%
San Francisco-Oakland-Fremont, CA	5	2	40%	948,278	23%
Santa Fe, NM	1	1	100%	140,801	100%
Seattle-Tacoma-Bellevue, WA	3	2	67%	2,454,683	77%
Sioux Falls, SD	4	1	25%	160,051	77%
Springfield, MA	3	3	100%	686,491	100%
St. George, UT	1	1	100%	119,188	100%
St. Louis, MO-IL	17	9	53%	2,362,217	84%
Tulsa, OK	7	7	100%	885,778	100%
Washington-Arlington-Alexandria, DC-VA-MD-WV	20	19	95%	5,202,469	99%
Worcester, MA	1	1	100%	781,704	100%
		States			
Maine	16	16	100%	1,318,220	100%
Maryland	24	24	100%	5,589,599	100%
Massachusetts	14	14	100%	6,433,367	100%
New Hampshire	10	10	100%	1,306,819	100%
New Mexico	33	33	100%	1,925,985	100%
Oklahoma	77	77	100%	3,543,442	100%
Utah	29	29	100%	2,490,334	100%
Vermont	14	14	100%	622,387	100%

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).

SUMMARY OF FINDINGS

able 2 reports the rates of drug-related deaths and drug-related suicide deaths per 100,000 population for metropolitan areas and States that participated in DAWN in 2005. Table 3 compares the rates of drug-related deaths in 2005 with those found for 2004 and reports the percentage change. (Comparisons are not made for drug-related suicide deaths because of their small numbers.) Table 3 is limited to those areas where the same jurisdictions participated in 2004 as in 2005. Both tables include indicators of the population coverage in DAWN for 2005.

Table 2
Rates of drug-related deaths and drug-related suicide deaths per 100,000 population, 2005

		g-related deaths 00 population*	DAWN	coverage				
Metropolitan area or State	Deaths	Suicide deaths	Population	Percent of area population				
Metropolitan areas								
Albuquerque, NM	20.9	2.5	797,517	100%				
Atlanta-Sandy Springs-Marietta, GA	6.2	0.6	3,248,432	65%				
Baltimore-Towson, MD	18.0	0.9	2,651,069	100%				
Bangor, ME	13.6	3.4	146,817	100%				
Barnstable Town, MA	14.6	1.8	226,161	100%				
Birmingham-Hoover, AL	11.6	0.8	656,014	60%				
Boston-Cambridge-Quincy, MA-NH	12.7	1.3	4,448,884	100%				
Buffalo-Niagara Falls, NY	9.3	1.1	1,144,796	100%				
Burlington-South Burlington, VT	15.6	3.4	205,222	100%				
Chicago-Naperville-Joliet, IL-IN-WI	9.6	0.9	8,007,898	85%				
Cleveland-Elyria-Mentor, OH	13.6	2.4	1,330,428	63%				
Dallas-Fort Worth-Arlington, TX	6.5	1.6	1,215,920	21%				
Denver-Aurora, CO	13.7	2.7	2,287,309	97%				
Detroit-Warren-Livonia, MI	17.1	1.3	4,204,630	94%				
Fargo, ND-MN	0.0	0.0	130,455	71%				
Farmington, NM	7.2	1.6	125,820	100%				
Houston-Sugar Land-Baytown, TX	11.7	1.9	3,762,844	70%				
Indianapolis-Carmel, IN	6.8	1.2	991,583	60%				
Kansas City, MO-KS	9.0	1.9	1,039,655	53%				
Las Cruces, NM	7.9	2.6	189,306	100%				
Lawton, OK	3.6	0.0	110,629	100%				
Lewiston-Auburn, ME	11.2	0.0	107,061	100%				
Los Angeles-Long Beach-Santa Ana, CA	10.9	1.3	9,941,197	77%				
Louisville-Jefferson County, KY-IN	10.9	1.3	699,051	58%				
Manchester-Nashua, NH	7.2	1.0	400,516	100%				
Milwaukee-Waukesha-West Allis, WI	17.9	1.9	918,673	61%				
Minneapolis-St. Paul-Bloomington, MN-WI	6.0	1.1	1,832,939	58%				

Table 2 (continued)
Rates of drug-related deaths and drug-related suicide deaths per 100,000 population, 2005

		g-related deaths 00 population*	DAWN coverage		
Metropolitan area or State	Deaths	Suicide deaths	Population	Percent of area population	
New Orleans-Metairie-Kenner, LA	26.3	2.2	547,753	42%	
New York-Northern New Jersey- Long Island, NY-NJ-PA	8.7	0.7	11,101,883	59%	
Ogden-Clearfield, UT	11.7	1.6	486,428	100%	
Oklahoma City, OK	6.4	1.1	1,154,991	100%	
Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	21.6	1.6	3,005,026	52%	
Phoenix-Mesa-Scottsdale, AZ	13.9	2.4	3,638,481	94%	
Pittsburgh, PA	17.8	1.7	1,233,036	52%	
Pittsfield, MA	8.3	1.5	131,783	100%	
Portland-South Portland-Biddeford, ME	10.5	2.9	512,992	100%	
Portland-Vancouver-Beaverton, OR-WA	11.4	2.1	1,541,920	74%	
Provo-Orem, UT	15.8	1.5	461,020	100%	
Salisbury, MD	12.1	2.6	115,918	100%	
Salt Lake City, UT	18.3	2.4	1,046,685	100%	
San Diego-Carlsbad-San Marcos, CA	10.7	2.0	2,936,609	100%	
San Francisco-Oakland-Fremont, CA	10.2	3.1	948,278	23%	
Santa Fe, NM	14.9	1.4	140,801	100%	
Seattle-Tacoma-Bellevue, WA	14.8	2.4	2,454,683	77%	
Sioux Falls, SD	0.6	2.5	160,051	77%	
Springfield, MA	11.4	2.3	686,491	100%	
St. George, UT	10.9	1.7	119,188	100%	
St. Louis, MO-IL	10.1	1.7	2,362,217	84%	
Tulsa, OK	10.5	1.2	885,778	100%	
Washington-Arlington-Alexandria, DC-VA-MD-WV	5.5	0.9	5,202,469	99%	
Worcester, MA	11.5	1.4	781,704	100%	
	Sta	ates			
Maine	11.4	1.7	1,318,220	100%	
Maryland	11.9	0.9	5,589,599	100%	
Massachusetts	13.5	1.4	6,433,367	100%	
New Hampshire	6.7	1.0	1,306,819	100%	
New Mexico	16.3	2.3	1,925,985	100%	
Oklahoma	7.2	1.2	3,543,442	100%	
Utah	15.6	1.9	2,490,334	100%	
Vermont	11.6	2.2	622,387	100%	

^{*} Drug-related deaths exclude drug-related suicide deaths.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).

Table 3
Rates of drug-related deaths and percentage change, 2004 and 2005

	Rate of drug-related deaths per 100,000 population [†]		Percent change in	DAWN coverage	
Metropolitan area or State*	2004	2005	rate, 2004 to 2005	Population	Percent of area population
-	Met	ropolitan areas	-	-	
Albuquerque, NM	18.8	20.9	11.3%	797,517	100%
Baltimore-Towson, MD	17.7	18.0	1.7%	2,651,069	100%
Birmingham-Hoover, AL	14.6	11.6	-20.5%	656,014	60%
Boston-Cambridge-Quincy, MA-NH	10.1	12.7	25.9%	4,448,884	100%
Buffalo-Niagara Falls, NY	8.7	9.3	7.8%	1,144,796	100%
Cleveland-Elyria-Mentor, OH	13.7	13.6	-0.8%	1,330,428	63%
Detroit-Warren-Livonia, MI	15.3	17.1	11.9%	4,204,630	94%
Houston-Sugar Land-Baytown, TX	9.5	11.7	23.3%	3,762,844	70%
Indianapolis-Carmel, IN	10.9	6.8	-38.2%	991,583	60%
Los Angeles-Long Beach-Santa Ana, CA	10.5	10.9	4.4%	9,941,197	77%
Louisville-Jefferson County, KY-IN	8.2	10.9	33.3%	699,051	58%
Milwaukee-Waukesha-West Allis, WI	16.0	17.9	11.8%	918,673	61%
Minneapolis-St. Paul-Bloomington, MN-WI	4.6	6.0	29.9%	1,832,939	58%
New York-Northern New Jersey- Long Island, NY-NJ-PA	9.5	8.7	-9.1%	11,101,883	59%
Ogden-Clearfield, UT	11.9	11.7	-1.9%	486,428	100%
Phoenix-Mesa-Scottsdale, AZ	11.3	13.9	22.9%	3,638,481	94%
Pittsburgh, PA	16.9	17.8	5.0%	1,233,036	52%
Portland-South Portland-Biddeford, ME	9.8	10.5	7.6%	512,992	100%
Portland-Vancouver-Beaverton, OR-WA	10.1	11.4	12.8%	1,541,920	74%
Provo-Orem, UT	12.0	15.8	32.4%	461,020	100%
Salt Lake City, UT	16.9	18.3	8.6%	1,046,685	100%
San Diego-Carlsbad-San Marcos, CA	9.6	10.7	10.9%	2,936,609	100%
Seattle-Tacoma-Bellevue, WA	15.6	14.8	-4.7%	2,454,683	77%
St. Louis, MO-IL	9.0	10.1	12.7%	2,362,217	84%
Washington-Arlington-Alexandria, DC-VA-MD-WV	5.2	5.4	4.9%	5,202,469	99%
		States			
Maine	9.8	11.4	16.0%	1,318,220	100%
Maryland	11.8	11.9	1.0%	5,589,599	100%
New Hampshire	7.5	6.7	-11.7%	1,306,819	100%
New Mexico	14.3	16.3	13.7%	1,925,985	100%
Utah	14.2	15.6	10.2%	2,490,334	100%
Vermont	10.0	11.6	15.9%	622,387	100%

^{*} The table is limited to those areas where the same jurisdictions participated in both years.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).

 $^{^{\}dagger}\,$ Drug-related deaths exclude drug-related suicide deaths.

PROFILES AND SPOTLIGHTS

AWN mortality data are reported for metropolitan areas with 30 or more deaths and for all participating States in six figures and tables that span two or more pages. These are referred to as "full profiles." Metropolitan areas with fewer than 30 deaths or areas with less than 50 percent coverage receive an "abbreviated profile" that includes just one of the six tables. Large, individual jurisdictions that are part of a multijurisdictional area and reported 60 or more deaths receive a full profile that is referred to as a "spotlight."

Among the 51 metropolitan areas, full profiles are provided for 36 metropolitan areas. Abbreviated profiles are provided for 12 metropolitan areas that submitted 30 or fewer drug-related deaths and for 3 metropolitan areas with less than 50 percent population coverage. Spotlights are provided for 39 individual jurisdictions.

Table 4 lists the metropolitan area profiles and spotlights for jurisdictions within those areas. Table 5 lists State profiles and profiles for metropolitan areas located wholly within those States.

At the end of this publication, the profiles and spotlights appear in separate sections in alphabetical order by state and metropolitan area name. The Contents to this publication lists the profiles and spotlights in the order in which they appear.

Table 4
Metropolitan area profiles and county spotlights

Type of profile	Metropolitan area profile	County spotlight(s)
Full	Albuquerque, NM	Bernalillo County, NM
Full	Atlanta-Sandy Springs-Marietta, GA	Fulton County, GA
Full	Baltimore-Towson, MD	Baltimore City, MD
		Baltimore County, MD
Abbreviated	Bangor, ME	None
Full	Barnstable Town, MA	None
Full	Birmingham-Hoover, AL	None
Full	Boston-Cambridge-Quincy, MA-NH	Essex County, MA
		Middlesex County, MA
		Norfolk County, MA
		Plymouth County, MA
		Suffolk County, MA
Full	Buffalo-Niagara Falls, NY	Erie County, NY
Full	Burlington-South Burlington, VT	None
Full	Chicago-Naperville-Joliet, IL-IN-WI	Cook County, IL
		Lake County, IL
Full	Cleveland-Elyria-Mentor, OH	None
Abbreviated	Dallas-Fort Worth-Arlington, TX	None
Full	Denver-Aurora, CO	Adams County, CO
		Denver County, CO
Full	Detroit-Warren-Livonia, MI	Macomb County, MI
		Oakland County, MI
		Wayne County, MI
Abbreviated	Fargo, ND-MN	None
Abbreviated	Farmington, NM	None
Full	Houston-Sugar Land-Baytown, TX	None
Full	Indianapolis-Carmel, IN	None
Full	Kansas City, MO-KS	Jackson County, MO
Abbreviated	Las Cruces, NM	None
Abbreviated	Lawton, OK	None
Abbreviated	Lewiston-Auburn, ME	None
Full	Los Angeles-Long Beach-Santa Ana, CA	None
Full	Louisville-Jefferson County, KY-IN	None
Abbreviated	Manchester-Nashua, NH	None
Full	Milwaukee-Waukesha-West Allis, WI	None
Full	Minneapolis-St. Paul-Bloomington, MN-WI	Hennepin County, MN
Abbreviated	New Orleans-Metairie-Kenner, LA*	Jefferson Parish, LA (Pre-Katrina)
	· · · · · ·	Jefferson Parish, LA (Post-Katrina)

Table 4 (continued)
Metropolitan area profiles and county spotlights

Type of profile	Metropolitan area profile	County spotlight(s)
Full	New York-Northern New Jersey-Long Island, NY-NJ-PA	Bronx County, NY
		Kings County, NY
		New York County, NY
		Queens County, NY
		Suffolk County, NY
Full	Ogden-Clearfield, UT	None
Full	Oklahoma City, OK	None
Full	Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	Delaware County, DE
		Philadelphia County, PA
Full	Phoenix-Mesa-Scottsdale, AZ	None
Full	Pittsburgh, PA	None
Abbreviated	Pittsfield, MA	None
Full	Portland-South Portland-Biddeford, ME	None
Full	Portland-Vancouver-Beaverton, OR-WA	Multnomah County, OR
Full	Provo-Orem, UT	Utah County, UT
Abbreviated	Salisbury, MD	None
Full	Salt Lake City, UT	Salt Lake County, UT
Full	San Diego-Carlsbad-San Marcos, CA	None
Abbreviated	San Francisco-Oakland-Fremont, CA	San Mateo County: CA
Abbreviated	Santa Fe, NM	None
Full	Seattle-Tacoma-Bellevue, WA	King County, WA
		Snohomish County, WA
Full	Springfield, MA	Hampden County, MA
Abbreviated	Sioux Falls, SD	None
Abbreviated	St. George, UT	None
Full	St. Louis, MO-IL	St. Louis City, MO
		St. Louis County, MO
Full	Tulsa, OK	Tulsa County, OK
Full	Washington-Arlington-Alexandria, DC-VA-MD-WV	District of Columbia
Full	Worcester, MA	None

^{*} Due to Hurricane Katrina, sufficient data were only available to prepare a pre-Katrina abbreviated profile for the New Orleans-Metairie-Kenner, LA, metropolitan area and to prepare pre- and post-Katrina spotlights for Jefferson Parish, LA.

Table 5
State profiles and metropolitan area profiles wholly in those States

State profile	Metropolitan area profiles	Type of profile
Maine	Bangor, ME	Abbreviated
	Lewiston-Auburn, ME	Abbreviated
	Portland-South Portland-Biddeford, ME	Full
Maryland	Baltimore-Towson, MD	Full
	Salisbury, MD	Abbreviated
Massachusetts	Barnstable Town, MA	Full
	Pittsfield, MA	Abbreviated
	Springfield, MA	Full
	Worcester, MA	Full
New Hampshire	Manchester-Nashua, NH	Abbreviated
New Mexico	Albuquerque, NM	Full
	Farmington, NM	Abbreviated
	Las Cruces, NM	Abbreviated
	Santa Fe, NM	Abbreviated
Oklahoma	Lawton, OK	Abbreviated
	Oklahoma City, OK	Full
	Tulsa, OK	Full
Utah	Ogden-Clearfield, UT	Full
	Provo-Orem, UT	Full
	Salt Lake City, UT	Full
	St. George, UT	Abbreviated
Vermont	Burlington-South Burlington, VT	Full

Full profiles

The full profile is composed of six exhibits plus a map and demographic information on the State or metropolitan area and their constituent counties. Figure 1 shows the general layout of the full profile. All profiles observe the following conventions:

- Counts of drug-related deaths are reported in two mutually exclusive categories: (1) drug-related deaths, and (2) drug-related suicide deaths. That is, counts of drug-related deaths exclude suicide deaths.
- The unit of measurement in all charts and tables is deaths or death rates.
- Death rates are reported as deaths per 100,000 population.
- Small numbers of deaths (defined as one to three deaths) are suppressed and replaced with "--." Zero deaths, though, are not suppressed; they are reported as "0."

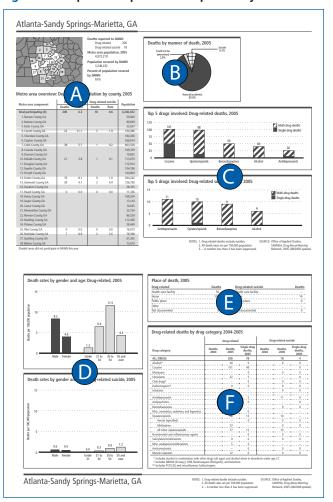
Map

Each profile begins with a map displaying the boundaries of the metropolitan area or State and its component counties. In this publication, the terms "death investigation jurisdiction" (or, simply, "jurisdiction") and "county" are used interchangeably because ME/Cs' offices are typically organized by county. The one exception occurs in Niagara County, NY, which is divided into four districts. For reporting purposes, the four districts that make up Niagara County, NY, are treated collectively as a single jurisdiction.

Both participating and nonparticipating jurisdictions are shown in the map. Jurisdictions that provided mortality data for 2005 are colored white. Jurisdictions in the area that did not provide data are shaded light blue. Areas outside of the metropolitan area or State are shaded darker blue.

Metropolitan area definitions used in this publication are those established by OMB, based on the 2000 decennial U.S. Census and updated in 2003.⁷ Changes in metropolitan statistical area (MSA) boundaries since 2003 have not altered

Figure 1. Sample metropolitan area profile layout



the metropolitan areas reported on in this publication. By OMB convention, the names of MSAs reflect the largest population centers (i.e., cities) in the MSA. If the relative population size of cities changes (i.e., the second largest becomes the largest), OMB changes the name of the MSA to reflect the new order of cities by size (i.e., the name of the larger city will appear first). This publication uses the name of the MSA that was current at the end of the data collection year.

Next to the map, the following items appear:

- Total number of drug-related deaths (excluding suicide deaths), and the number of drug-related suicide deaths reported by participating jurisdictions,
- Total population of the area,
- Population covered by participating jurisdictions, and
- Percentage of population residing in participating jurisdictions.⁸

Office of Management and Budget, Revised Definitions of Metropolitan Statistical Areas, New Definitions of Micropolitan Statistical Areas and Combined Statistical Areas, and Guidance on Uses of the Statistical Definitions of These Areas, Bulletin No. 03-04, June 6, 2003. (Available at http://www.whitehouse.gov/omb/bulletins/b03-04.html.)

⁸ Population estimates for 2004 and 2005 were obtained from the U.S. Census Bureau County-Level Population Estimates (CPOP file), Vintage 2006, released August 2007. (Available at http://www.census.gov/popest/.)

Table A: Metro area overview: Deaths and population by county, 2005

Below the map, Table A lists each of the component jurisdictions for the area. Each jurisdiction is numbered to correspond to the numbers shown on the area map. In metropolitan areas that cross State borders, jurisdictions are ordered first by State and then alphabetically by county name. Nonparticipating jurisdictions are included in the list with a shaded background to distinguish them from participating jurisdictions.

Information in Table A for each jurisdiction includes the following:

- Number of drug-related deaths and corresponding rates (deaths per 100,000 population),
- Number of drug-related suicide deaths and corresponding rates (suicide deaths per 100,000 population), and
- Population for the jurisdiction.

The top row of the table totals this information for just the participating jurisdictions.

Rates, because they are population adjusted, can be compared across jurisdictions, metropolitan areas, and States. This standardization does not take into account, however, the differences in applicable laws that specify which deaths are subject to ME/C review or other factors that may confound comparisons.

The subsequent tables and figures (B through F) are based on data aggregated across the participating jurisdictions in each metropolitan area or State.

Figure B: Deaths by manner of death, 2005

Figure B is a pie chart that displays manner of death for drug-related deaths and drug-related suicide deaths. Solid-colored slices are reserved for drug-related deaths other than suicides; the patterned slice shows the suicide deaths. Reading clockwise, the manners of death are identified as follows:

- Suicide, black lines on white background,
- Homicide deaths, white,
- Natural and accidental deaths, darkest blue, and
- Deaths for which manner of death could not be determined, light blue.

Figure C: Top 5 drugs involved: Drug-related deaths, 2005 Top 5 drugs involved: Drug-related suicide deaths, 2005

Separate bar charts show the five most common types of drugs (e.g., opiates/opioids, benzodiazepines) reported to DAWN for drug-related deaths and drug-related suicide deaths across the participating jurisdictions. The number shown above each bar is the number of deaths reported for a specific drug type. The name of the drug type is printed below each bar. Each bar is partitioned to display separately the portion of deaths involving a single drug type (solid blue area in bottom portion of bar) versus multiple drug types (striped area in top of bar). A bar is not printed if there are fewer than four deaths associated with a drug type, and therefore, fewer than five bars may appear. The top 5 drug types are identified from among 17 different drug types, as listed in Table F (see below).

A single death that involved two drugs of *different types* (e.g., cocaine and heroin) would be counted in two bars (e.g., cocaine and heroin, respectively). As a result, summing the number of deaths reported in each bar will double-count deaths that involved multiple types of drugs. A death that involved two drugs of the *same type* (e.g., multiple opiates/opioids, such as methadone and heroin) will be counted once (e.g., in the bar for opiates/opioids).

Grouping drugs by drug type eliminates double counting due to the following causes: redundant drug reports (e.g., "cocaine" and its metabolite "benzoylecgonine" being reported for the same death); redundant reports from nonspecific terms (e.g., "heroin" and "opiates" being reported for the same death); and drug reports that may be indistinguishable (e.g., "heroin" and "morphine").

Figure D: Death rates by gender and age: Drug-related, 2005 Death rates by gender and age: Drug-related suicide deaths, 2005

Figure D displays the gender and categorical age of decedents in drug-related deaths and drug-related suicide deaths, in terms of deaths per 100,000 population. Only population in participating jurisdictions is considered in the calculation of these rates. Taking population size into account enables comparisons to be made across age and gender subgroups.

Table E: Place of death, 2005

Table E reports the place of death for drug-related deaths and drug-related suicide deaths. Deaths in emergency departments and other health care facilities have been combined into the single category "Health care facility."

Table F: Drug-related deaths by drug category, 2004-2005

Table F reports, by drug type or drug, the count of drug-related deaths and drug-related suicide deaths for 2004 and 2005. The first row of Table F summarizes deaths across all drug categories; the subsequent rows provide detail for 17 specific drug types or drugs of particular interest.

Data for both 2004 and 2005 are reported when the same jurisdictions participated in both years. If comparable data for 2004 are not available (e.g., due to nonparticipation) or are not comparable to those shown for 2005 (e.g., in the Chicago metropolitan area, DuPage County, IL, participated in 2005 but not in 2004), the columns are left blank.

Counts of drug-related deaths and drug-related suicide deaths include deaths that involved both single and multiple drugs. Summing these deaths across drug types or drugs could result in double counting deaths associated with multiple drug types. To help provide a better understanding of single versus multidrug involvement, counts of single-drug deaths are reported. Single-drug deaths involve the listed drug type or drug and no other, and they are a subset of the total count of deaths.

The 17 drug categories shown in this table are derived from DAWN's standard drug classification scheme and include the following:⁹

⁹ The classification of drugs used by DAWN is derived from the Multum Lexicon, © 2008, Multum Information Services, Inc. The classification has been modified to meet DAWN's unique requirements (2008). The Multum Licensing Agreement governing use of the Lexicon is provided in Appendix C. (Also available at: http://www.multum.com/.)

Alcohol. Alcohol is reportable to DAWN for all ages if at least one other reportable substance was also present. In decedents under age 21, alcohol may be reported alone. Therefore, any single-drug death for alcohol is for a decedent under age 21. Alcohol is not included among the illicit drugs, although it is an illegal drug for individuals under age 21.

The next six rows in Table F pertain to illicit drugs:

- Cocaine, which includes both crack and powder cocaine.
- Marijuana, which includes marijuana and hashish. Some jurisdictions do not conduct toxicology tests for the
 presence of marijuana and do not report marijuana to DAWN. The full extent of the underreporting of marijuana
 is unknown.
- **Stimulants**, which include amphetamines and methamphetamine. This category does not include other central nervous system stimulants, such as caffeine or methylphenidate.
- Club drugs, which include methylenedioxymethamphetamine (MDMA, or Ecstasy); gamma hydroxy butyrate (GHB) and its precursor, gamma butyrolactone (GBL); flunitrazepam (Rohypnol); and ketamine. In other settings or studies, the drugs classified as club drugs may exclude some of these drugs or include others, such as LSD or methamphetamine. Therefore, one should be cautious when comparing findings from DAWN with findings from other sources.
- Hallucinogens, which include LSD, PCP, and miscellaneous hallucinogens, such as psilocybin.
- Inhalants, which include anesthetic gases and any psychoactive nonpharmaceutical substance for which the documented route of administration was inhalation.

The remaining rows in Table F are devoted to prescription and over-the-counter pharmaceuticals. For this table, heroin is categorized and reported on as an opiate/opioid. Low-frequency drugs have been aggregated into higher-level categories:

- Antidepressants, which include monoamine oxidase inhibitors (MAOIs), selective serotonin reuptake inhibitors (SSRIs), tricyclic antidepressants, and miscellaneous antidepressants, such as bupropion and venlafaxine.
- Antipsychotics, which include phenothiazine antipsychotics, psychotherapeutic combinations, thioxanthenes, and miscellaneous antipsychotic agents, such as lithium and quetiapine.
- **Benzodiazepines**, which include alprazolam, clonazepam, diazepam, and others, including those reported simply as "benzodiazepines." Flunitrazepam, which is classified as a club drug, is not included as a benzodiazepine.
- Miscellaneous anxiolytics, sedatives, and hypnotics, which include diphenhydramine and zolpidem.
- Opiates/opioids, which include all types of natural and synthetic opiates and opioid analgesics. This category is the only one that is subdivided. The subdivisions are the following:
 - Heroin (specified), which includes heroin reported by name or its specific metabolites;¹⁰
 - Methadone: and

Overall, 99.5 percent of drugs in the category "Heroin (specified)" were reported to DAWN as "heroin" or its metabolite "monoacetylmorphine." The remaining 0.5 percent was reported as acetylmorphine, diacetylmorphine, acetylcodeine, monoacetylcodeine, heroin dope, or black tar heroin. Morphine and unspecified opiates are not included in the "Heroin (specified)" category. Morphine is not classified as heroin because it is not possible to differentiate morphine, the metabolite of heroin, from morphine itself. Overall, the term "morphine" or "free morphine" accounted for 98 percent of reports classified as "morphine," and the term "opiates" accounted for 99 percent of the unspecified opiates.

- All other opiates/opioids, which includes the balance of deaths reported in the row labeled "Opiates/
 opioids" and also includes codeine, hydrocodone, oxycodone, and morphine, as well as drug reports
 designated simply as "opiates."¹¹
- Nonsteroidal anti-inflammatory agents (NSAIDs), which include ibuprofen and naproxen. Cox-2 inhibitors are not classified as NSAIDs in the taxonomy used by DAWN.
- Salicylates/combinations, which include aspirin alone and in combination with other ingredients.
- Miscellaneous analgesics/combinations, which are primarily acetaminophen alone or in combination with other ingredients.
- Anticonvulsants, which include carbamazepine and gabapentin.
- Muscle relaxants, which include carisoprodol and cyclobenzaprine.

Limitations to data

Not every reported substance (drug) is, by itself, the cause of death or even a contributor to the death. DAWN's broad definition of drug involvement requires only that the drug is related to the death. Therefore, even in single-drug deaths, reported drugs may not be a direct cause of death. Furthermore, incidental reporting (i.e., reporting of drugs unrelated to the death) is unavoidable due to ambiguities and insufficiencies in the ME/C's records.

The total number of deaths in some drug categories is often quite small and of limited significance. The intent in reporting small counts is primarily to indicate the relative occurrence of deaths in different drug categories.

Numbers less than four but greater than zero are suppressed.

Abbreviated profiles for selected metropolitan areas

To warrant a full profile, the participating jurisdictions of a metropolitan area in combination must have reported more than 30 drug-related deaths or drug-related suicide deaths, and the area's population coverage must exceed 50 percent. If either of these two conditions was not met, an abbreviated profile is provided for the area. In contrast to full profiles, abbreviated profiles include only a map and Table A (see above).

Reporting on the New Orleans-Metairie-Kenner, LA, metropolitan area presented a special situation in 2005 due to Hurricane Katrina and its devastating impact on the community, its population, and the normal operation of public agencies. With available data, it was only possible to prepare an abbreviated profile for the New Orleans-Metairie-Kenner, LA, metropolitan area for the 8-month period prior to Hurricane Katrina (using U.S. Census estimates as of June 1, 2005). Death rates reported in this profile were annualized to facilitate comparison with the pre- and post-Katrina spotlights for Jefferson County, LA (see below), and other metropolitan areas.

¹¹ Some examples may assist readers in interpreting this classification. A death that involved heroin and methadone would be counted once in the "Opiates/opioids" category, once in the "Heroin (specified)" row, and once in the "Methadone" row. A death that involved morphine (prescription morphine or the metabolite for heroin) would be counted in the "Opiates/opioids" category and in the row for "All other opiates/opioids." A death that involved both morphine and codeine (a possible indicator for heroin) would be counted once in the "Opiates/opioids" category and once in the row for "All other opiates/opioids."

Spotlights

Spotlights are produced for individual jurisdictions in which 60 or more drug-related deaths were reported. The purpose is to distinguish findings for a single location from those of the metropolitan area as a whole. Spotlights may appear for jurisdictions even if the metropolitan area itself had less than 50 percent population coverage. In some instances, even if a jurisdiction has 60 or more deaths, a spotlight may not be needed. Such is the case when a metropolitan area contains only one county or had only one county participating in DAWN.

Spotlights have essentially the same format as the full metropolitan area profile. Spotlights include the map; Figures B, C, and D; and Tables E and F, as described above. Because of the small numbers, drug-related suicide deaths have been removed from all exhibits except the jurisdiction summary and Figure B.

Two spotlights were prepared for Jefferson Parish, LA, the largest jurisdiction in the New Orleans-Metairie-Kenner, LA, metropolitan area. One spotlight corresponds to the 8-month period before Hurricane Katrina, and the other corresponds to the 4-month period following Hurricane Katrina. Population estimates for the calculation of rates for the two periods are from the *2005 American Community Survey Special Product for the Gulf Coast Area.*^{12,13} Rates reported in these spotlights were annualized to facilitate comparisons with the New Orleans metropolitan area profile and other spotlights and profiles.

State profiles

Eight statewide ME/C systems participated in DAWN in 2005. A full profile is provided for each of the following States:

- Maine,
- Maryland,
- Massachusetts,
- New Hampshire,
- New Mexico,
- Oklahoma,
- Utah, and
- Vermont.

Any metropolitan areas that fell wholly within the eight statewide ME/C systems and reported more than 30 drug-related deaths or drug-related suicide deaths to DAWN in 2005 received a full profile (Table 5).

Additional detail on the DAWN data collection methodology is provided in Appendix A. A glossary of terms used in this report appears in Appendix B.

¹² U.S. Census Bureau, 2005 American Community Survey Special Product for the Gulf Coast Area, accessed 8/22/2008. (Available at: http://www.census.gov/acs/www/Products/Profiles/gulf_coast/index.htm.)

¹³ Pre- and post-hurricane population figures were unavailable for St. Charles Parish and St. John the Baptist Parish, which also reported to DAWN for the entire year. Data on drug-related deaths during 2005 from Orleans Parish and Plaquemines Parish were too incomplete to be included in this publication.

STATE PROFILES

Maine



Deaths reported to DAWN

Drug-related 150 Drug-related suicide 23

State population, 2005 1,318,220

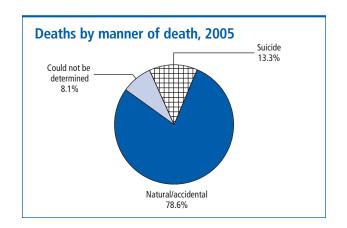
Population covered by DAWN 1,318,220

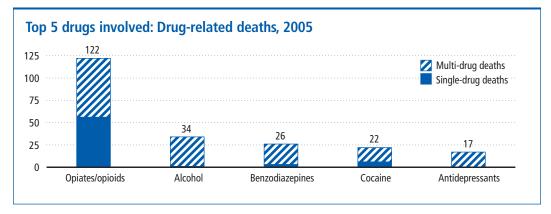
Percent of population covered by DAWN

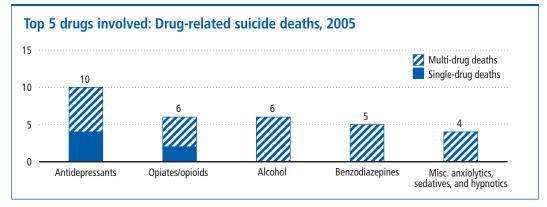
100%

State overview: Deaths and population by county, 2005

Counties	Drug-r	elated	Drug-relat	ed suicide	Damulatian
Counties	Deaths	Rate	Deaths	Rate	Population
Total participating (16)	150	11.4	23	1.7	1,318,220
1. Androscoggin County	12	11.2	0	0.0	107,061
2. Aroostook County	9	12.3	0	0.0	73,030
3. Cumberland County	35	12.8	10	3.6	274,194
4. Franklin County	6	20.1	0	0.0	29,861
5. Hancock County	6	11.2	0	0.0	53,613
6. Kennebec County	15	12.4	2	1.7	120,782
7. Knox County	5	12.2	0	0.0	41,088
8. Lincoln County	3	8.5	0	0.0	35,200
9. Oxford County	9	15.9	0	0.0	56,766
10. Penobscot County	20	13.6	5	3.4	146,817
11. Piscataquis County	1	5.7	0	0.0	17,596
12. Sagadahoc County	1	2.7	0	0.0	36,734
13. Somerset County	4	7.7	0	0.0	51,649
14. Waldo County	2	5.2	0	0.0	38,527
15. Washington County	4	12.0	1	3.0	33,238
16. York County	18	8.9	5	2.5	202,064



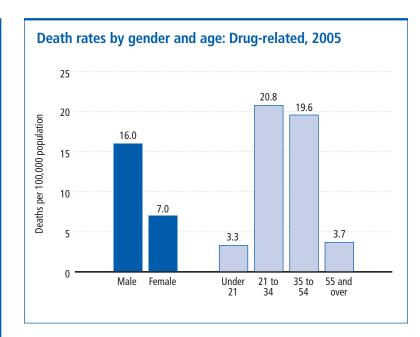


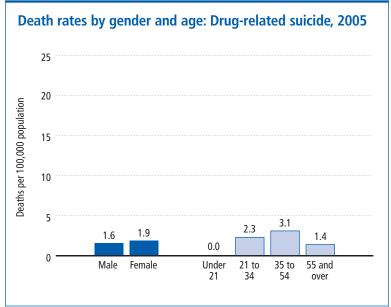


NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).





Place of death, 2005

Drug-related	Deaths
Health care facility	42
Home	88
Public place	7
Other	13
Not documented	0

Drug-related suicide	Deaths
Health care facility	6
Home	15
Public place	
Other	
Not documented	0

Drug-related deaths by drug category, 2004-2005

Drug category		Drug-relate	k	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	129	150	71	27	23	9	
Alcohol*	34	34		6	6	0	
Cocaine	26	22	6		0	0	
Marijuana	0		0	0	0	0	
Stimulants		0	0	0	0	0	
Club drugs†				0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants		0	0	0	0	0	
Antidepressants	20	17	0	12	10	4	
Antipsychotics	4	7					
Benzodiazepines	26	26			5	0	
Misc. anxiolytics, sedatives, and hypnotics			0	4	4	0	
Opiates/opioids	112	122	56	9	6		
Heroin (specified)	4	5		0			
Methadone	67	66	36	4			
All other opiates/opioids	48	61	19	5		0	
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations	0	0	0	0	0	0	
Misc. analgesics/combinations	4	5	0			0	
Anticonvulsants	5		0				
Muscle relaxants		5	0			0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

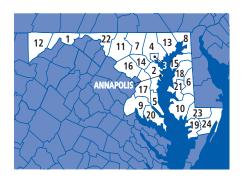
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Maryland



Deaths reported to DAWN

Drug-related 665
Drug-related suicide 51

State population, 2005 5,589,599

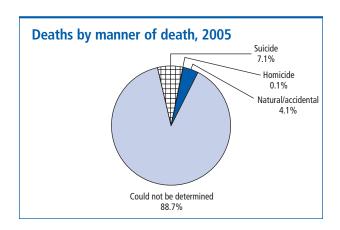
Population covered by DAWN 5.589.599

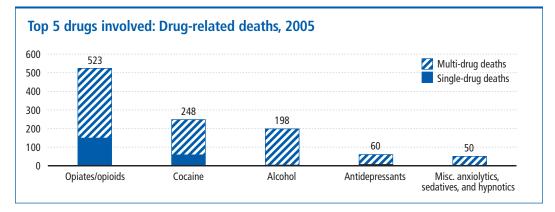
Percent of population covered by DAWN

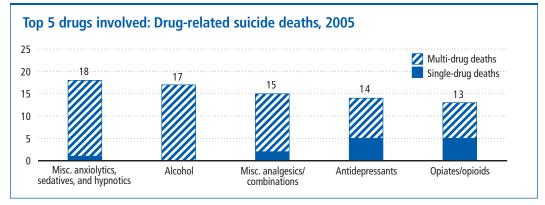
100%

State overview: Deaths and population by county, 2005

		•	•	•		
Counties	Drug-r	elated	Drug-relate	Drug-related suicide		
Counties	Deaths	Rate	Deaths	Rate	Population	
Total participating (24)	665	11.9	51	0.9	5,589,599	
1. Allegany County	8	10.9	3	4.1	73,245	
2. Anne Arundel County	54	10.6	2	0.4	509,397	
3. Baltimore city	285	44.8	2	0.3	636,377	
4. Baltimore County	87	11.1	12	1.5	783,405	
5. Calvert County	6	6.8	0	0.0	87,622	
6. Caroline County	1	3.1	1	3.1	31,805	
7. Carroll County	11	6.5	2	1.2	168,397	
8. Cecil County	15	15.4	1	1.0	97,474	
9. Charles County	5	3.6	1	0.7	138,106	
10. Dorchester County	2	6.4	1	3.2	31,351	
11. Frederick County	14	6.4	3	1.4	220,409	
12. Garrett County	1	3.3	0	0.0	29,863	
13. Harford County	25	10.5	2	0.8	238,850	
14. Howard County	13	4.8	3	1.1	269,174	
15. Kent County	0	0.0	0	0.0	19,908	
16. Montgomery County	40	4.3	8	0.9	927,405	
17. Prince George's County	49	5.8	4	0.5	842,764	
18. Queen Anne's County	2	4.4	0	0.0	45,469	
19. Somerset County	2	7.8	1	3.9	25,666	
20. St. Mary's County	12	12.4	1	1.0	96,868	
21. Talbot County	4	11.2	1	2.8	35,630	
22. Washington County	13	9.2	1	0.7	141,563	
23. Wicomico County	12	13.3	2	2.2	90,252	
24. Worcester County	4	8.2	0	0.0	48,599	

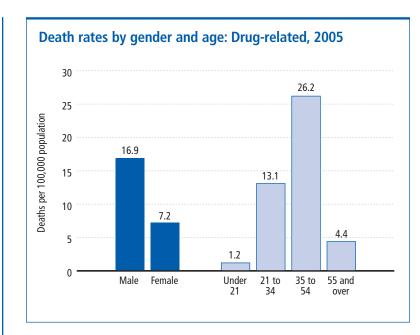


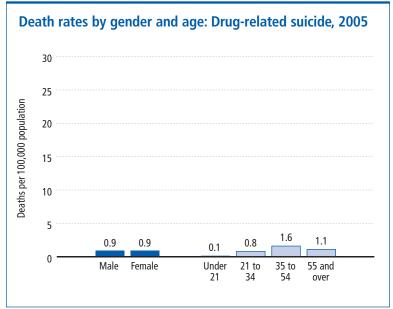




- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).





Place of death, 2005

Drug-related	Deaths
Health care facility	288
Home	261
Public place	15
Other	100
Not documented	

Drug-related suicide	Deaths
Health care facility	15
Home	30
Public place	
Other	5
Not documented	0

Drug-related deaths by drug category, 2004-2005

Drug category		Drug-relate	k	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	655	665	230	40	51	20	
Alcohol*	220	198		13	17	0	
Cocaine	267	248	58	6		0	
Marijuana			0	0	0	0	
Stimulants		4		0	0	0	
Club drugs†			0	0	0	0	
Hallucinogens††	6	7	0	0	0	0	
Inhalants		0	0	0	0	0	
Antidepressants	104	60	6	15	14	5	
Antipsychotics	26	14		4	5		
Benzodiazepines	28	22				0	
Misc. anxiolytics, sedatives, and hypnotics	70	50		15	18		
Opiates/opioids	510	523	148	11	13	5	
Heroin (specified)	78	18	0		0	0	
Methadone	137	177	66	0		0	
All other opiates/opioids	430	394	82	11	13	5	
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations				0			
Misc. analgesics/combinations	65	44		10	15		
Anticonvulsants	4		0	0			
Muscle relaxants	16	13				0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Massachusetts



Deaths reported to DAWN

Drug-related 863
Drug-related suicide 88

State population, 2005 6,433,367

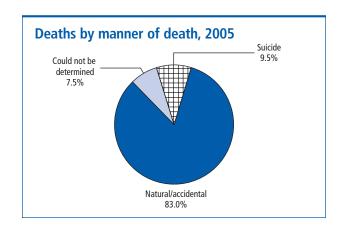
Population covered by DAWN 6,433,367

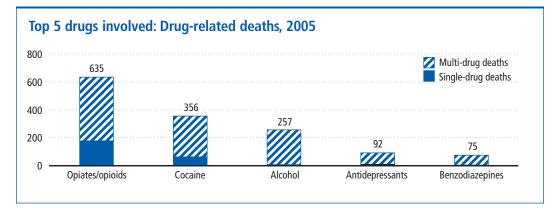
Percent of population covered by DAWN

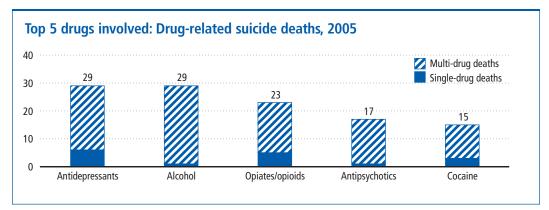
100%

State overview: Deaths and population by county, 2005

Counties	Drug-r	Drug-related Drug-related suicide			Population	
Counties	Deaths	Rate	Deaths	Rate	Population	
Total participating (12)	863	13.5	88	1.4	6,433,367	
1. Barnstable County	33	14.6	4	1.8	226,161	
2. Berkshire County	11	8.3	2	1.5	131,783	
3. Bristol County	105	19.2	3	0.5	545,861	
4. Dukes County	0	0.0	0	0.0	15,553	
5. Essex County	116	15.8	11	1.5	734,261	
6. Franklin County	4	5.5	0	0.0	72,310	
7. Hampden County	64	13.9	12	2.6	460,828	
8. Hampshire County	10	6.5	4	2.6	153,353	
9. Middlesex County	150	10.2	20	1.4	1,464,985	
10. Nantucket County	0	0.0	0	0.0	10,139	
11. Norfolk County	60	9.2	11	1.7	652,530	
12. Plymouth County	65	13.2	7	1.4	491,934	
13. Suffolk County	155	22.4	3	0.4	691,965	
14. Worcester County	90	11.5	11	1.4	781,704	



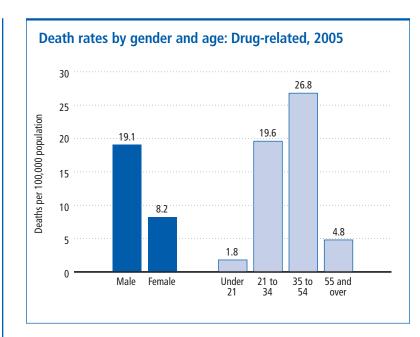


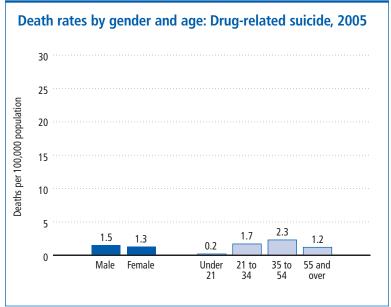


NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).





Place of death, 2005

Drug-related	Deaths
Health care facility	359
Home	366
Public place	32
Other	106
Not documented	0

Drug-related suicide	Deaths
Health care facility	16
Home	54
Public place	5
Other	13
Not documented	0

Drug-related deaths by drug category, 2004-2005

Drug category		Drug-relate	t k	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS		863	311		88	28	
Alcohol*		257	7		29		
Cocaine		356	63		15		
Marijuana		15			0	0	
Stimulants		6	0		0	0	
Club drugs†		4			0	0	
Hallucinogens††		0	0		0	0	
Inhalants							
Antidepressants		92	10		29	6	
Antipsychotics		30	4		17		
Benzodiazepines		75	4		10	0	
Misc. anxiolytics, sedatives, and hypnotics		14	0		9		
Opiates/opioids		635	178		23	5	
Heroin (specified)		149	60			0	
Methadone		103	25			0	
All other opiates/opioids		424	93		21	5	
Nonsteroidal anti-inflammatory agents			0			0	
Salicylates/combinations		7	5		4		
Misc. analgesics/combinations		13			6		
Anticonvulsants			0			0	
Muscle relaxants	,				0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

New Hampshire



Deaths reported to DAWN

Drug-related 87
Drug-related suicide 13

State population, 2005 1,306,819

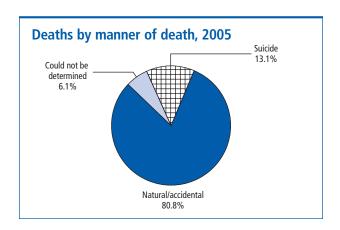
Population covered by DAWN 1,306,819

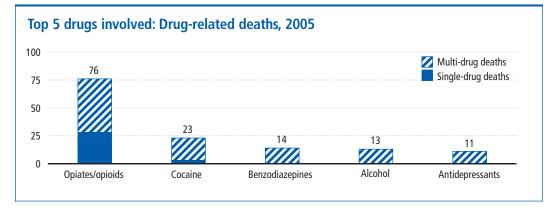
Percent of population covered by DAWN

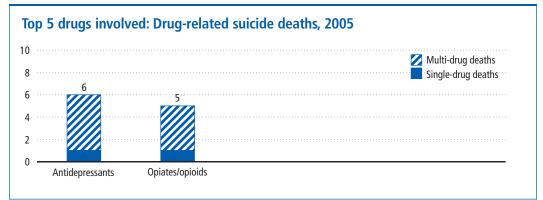
100%

State overview: Deaths and population by county, 2005

Counties	Drug-related		Drug-related suicide		Population
	Deaths	Rate	Deaths	Rate	ropulation
Total participating (10)	87	6.7	13	1.0	1,306,819
1. Belknap County	5	8.1	0	0.0	61,422
2. Carroll County	2	4.3	1	2.1	47,048
3. Cheshire County	5	6.5	0	0.0	77,053
4. Coos County	3	9.0	1	3.0	33,156
5. Grafton County	11	13.0	0	0.0	84,793
6. Hillsborough County	29	7.2	4	1.0	400,516
7. Merrimack County	11	7.5	2	1.4	146,823
8. Rockingham County	9	3.1	3	1.0	294,211
9. Strafford County	9	7.6	1	0.8	118,998
10. Sullivan County	3	7.0	1	2.3	42,799



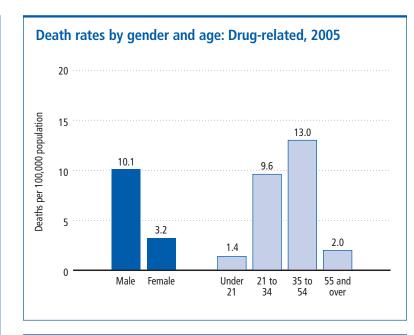


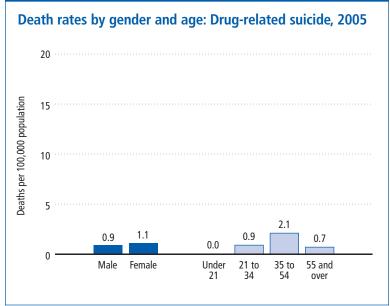


NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.

SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).





Drug-related	Deaths
Health care facility	14
Home	32
Public place	0
Other	0
Not documented	41

Drug-related suicide	Deaths
Health care facility	4
Home	
Public place	0
Other	0
Not documented	7

		Drug-relate	ŀ	Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	98	87	35	14	13	4	
Alcohol*	5	13	0		0	0	
Cocaine	31	23				0	
Marijuana	0	0	0	0	0	0	
Stimulants				0	0	0	
Club drugs†		0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants	0		0	0	0	0	
Antidepressants	12	11	0	7	6		
Antipsychotics						0	
Benzodiazepines	16	14	0			0	
Misc. anxiolytics, sedatives, and hypnotics			0			0	
Opiates/opioids	81	76	28		5		
Heroin (specified)	13	11	6	0	0	0	
Methadone	31	36	14	0		0	
All other opiates/opioids	43	35	8		4		
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations	0	0	0	0	0	0	
Misc. analgesics/combinations				0			
Anticonvulsants	0		0	0	0	0	
Muscle relaxants			0			0	

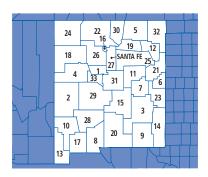
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

New Mexico



Deaths reported to DAWN

Drug-related 313 Drug-related suicide 45

State population, 2005 1,925,985

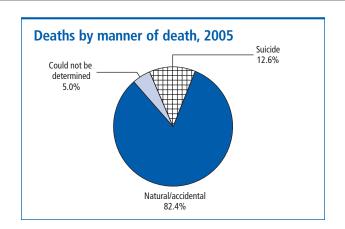
Population covered by DAWN 1,925,985

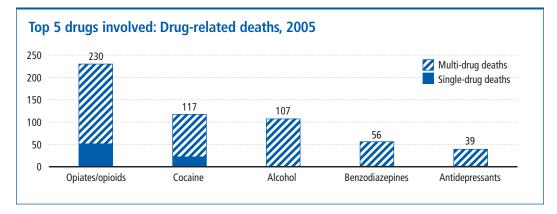
Percent of population covered by DAWN

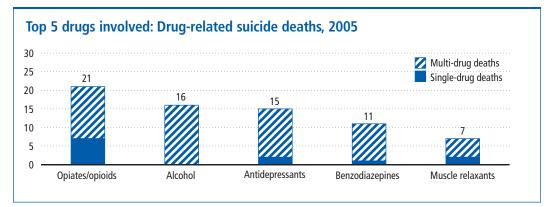
100%

State overview: Deaths and population by county, 2005

		elated	Drug-relat	Total	
Counties	Deaths	Rate	Deaths	Rate	population
Total participating (33)	313	16.3	45	2.3	1,925,985
1. Bernalillo County	142	23.5	18	3.0	603,783
2. Catron County	1	29.5	0	0.0	3,395
3. Chaves County	11	17.8	0	0.0	61,861
4. Cibola County	4	14.5	0	0.0	27,598
5. Colfax County	1	7.3	1	7.3	13,710
6. Curry County	2	4.4	0	0.0	45,677
7. DeBaca County	0	0.0	0	0.0	2,034
8. Dona Ana County	15	7.9	5	2.6	189,306
9. Eddy County	8	15.6	2	3.9	51,269
10. Grant County	2	6.8	1	3.4	29,609
11. Guadalupe County	0	0.0	0	0.0	4,380
12. Harding County	0	0.0	0	0.0	737
13. Hidalgo County	0	0.0	0	0.0	5,115
14. Lea County	5	8.8	1	1.8	56,650
15. Lincoln County	5	23.8	1	4.8	20,976
16. Los Alamos County	0	0.0	0	0.0	18,858
17. Luna County	1	3.8	0	0.0	26,632
18. McKinley County	12	16.7	2	2.8	71,839
19. Mora County	1	19.5	0	0.0	5,127
20. Otero County	8	12.7	2	3.2	63,128
21. Quay County	2	21.6	1	10.8	9,259
22. Rio Arriba County	17	41.8	2	4.9	40,633
23. Roosevelt County	4	22.0	0	0.0	18,205
24. San Juan County	9	7.2	2	1.6	125,820
25. San Miguel County	3	10.2	0	0.0	29,453
26. Sandoval County	10	9.3	1	0.9	107,146
27. Santa Fe County	21	14.9	2	1.4	140,801
28. Sierra County	4	31.3	2	15.7	12,777
29. Socorro County	2	11.0	0	0.0	18,194
30. Taos County	8	25.3	0	0.0	31,610
31. Torrance County	4	22.9	0	0.0	17,456
32. Union County	0	0.0	1	26.2	3,815
33. Valencia County	11	15.9	1	1.4	69,132

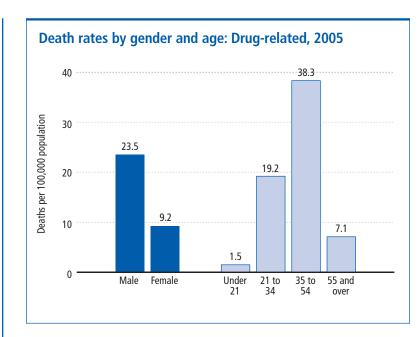


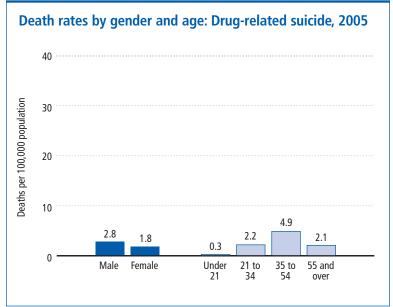




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	70
Home	147
Public place	31
Other	65
Not documented	0

Drug-related suicide	Deaths
Health care facility	12
Home	25
Public place	
Other	5
Not documented	0

		Drug-relate	ŀ	Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	272	313	92	43	45	15	
Alcohol*	89	107	0	15	16	0	
Cocaine	98	117	22		4		
Marijuana	0	11	0		0	0	
Stimulants	21	35	13			0	
Club drugs†	0	0	0	0	0	0	
Hallucinogens††		0	0	0	0	0	
Inhalants				0			
Antidepressants	32	39		19	15		
Antipsychotics		6	0		4	0	
Benzodiazepines	26	56		11	11		
Misc. anxiolytics, sedatives, and hypnotics	12	9	0	0	7	0	
Opiates/opioids	201	230	51	22	21	7	
Heroin (specified)	73	100	29				
Methadone	46	38	6			0	
All other opiates/opioids	105	107	16	18	18	6	
Nonsteroidal anti-inflammatory agents			0		0	0	
Salicylates/combinations	0	0	0			0	
Misc. analgesics/combinations	8	7			4	0	
Anticonvulsants	9	10	0			0	
Muscle relaxants	14	14	0	6	7		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Oklahoma



Deaths reported to DAWN

Drug-related 254
Drug-related suicide 44

State population, 2005

3,543,442

Population covered by DAWN

3,543,442

Percent of population covered by DAWN

100%

State overview: Deaths and population by county, 2005

	Drug-r	Drug-related		ed suicide	B 1.0		Drug-r	elated	Drug-relate	ed suicide	B 1.0
Counties	Deaths	Rate	Deaths	Rate	Population	Counties	Deaths	Rate	Deaths	Rate	Population
Total participating (76)	254	7.2	44	1.2	3,543,442	25. Garvin County	6	22.1	0	0.0	27,190
1. Adair County	3	13.7	1	4.6	21,956	26. Grady County	1	2.0	0	0.0	49,364
2. Alfalfa County	1	17.5	0	0.0	5,719	27. Grant County	0	0.0	0	0.0	4,779
3. Atoka County	1	7.0	1	7.0	14,338	28. Greer County	0	0.0	1	17.0	5,870
4. Beaver County	3	55.5	0	0.0	5,401	29. Harmon County	0	0.0	0	0.0	3,046
5. Beckham County	3	15.9	0	0.0	18,810	30. Harper County	0	0.0	0	0.0	3,347
6. Blaine County	1	7.8	0	0.0	12,876	31. Haskell County	0	0.0	1	8.3	12,084
7. Bryan County	1	2.7	2	5.3	37,716	32. Hughes County	0	0.0	0	0.0	13,897
8. Caddo County	3	10.0	0	0.0	30,089	33. Jackson County	2	7.6	0	0.0	26,338
9. Canadian County	4	4.1	0	0.0	98,451	34. Jefferson County	1	15.5	0	0.0	6,447
10. Carter County	4	8.5	0	0.0	47,032	35. Johnston County	3	29.1	0	0.0	10,295
11. Cherokee County	3	6.8	1	2.3	44,416	36. Kay County	0	0.0	0	0.0	46,195
12. Choctaw County	0	0.0	2	13.1	15,315	37. Kingfisher County	0	0.0	0	0.0	14,230
13. Cimarron County	1	35.6	0	0.0	2,809	38. Kiowa County	0	0.0	0	0.0	9,882
14. Cleveland County	10	4.5	3	1.3	224,244	39. Latimer County	0	0.0	0	0.0	10,607
15. Coal County	0	0.0	0	0.0	5,736	40. Le Flore County	5	10.1	0	0.0	49,412
16. Comanche County	4	3.6	0	0.0	110,629	41. Lincoln County	1	3.1	2	6.2	32,344
17. Cotton County	0	0.0	0	0.0	6,526	42. Logan County	2	5.5	0	0.0	36,414
18. Craig County	1	6.6	0	0.0	15,047	43. Love County	0	0.0	0	0.0	9,148
19. Creek County	8	11.6	1	1.5	68,674	44. Major County	0	0.0	0	0.0	7,309
20. Custer County	1	4.0	0	0.0	25,278	45. Marshall County	1	7.0	1	7.0	14,356
21. Delaware County	1	2.5	1	2.5	39,221	46. Mayes County	2	5.1	1	2.5	39,416
22. Dewey County	0	0.0	0	0.0	4,534	47. Mcclain County	3	10.0	0	0.0	29,982
23. Ellis County	0	0.0	0	0.0	3,958	48. McCurtain County	1	3.0	0	0.0	33,871
24. Garfield County	2	3.5	1	1.8	56,885	49. McIntosh County	2	10.1	0	0.0	19,834

(continued)

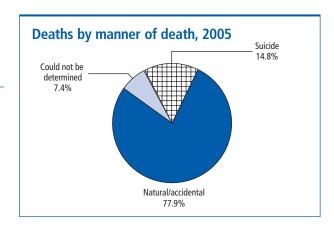
- NOTES: 1. Drug-related deaths exclude suicides. 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

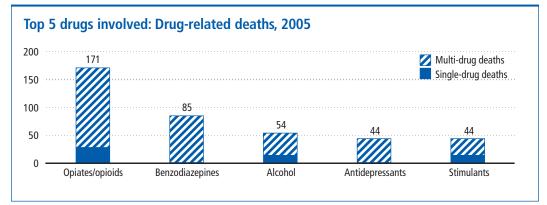
SOURCE: Office of Applied Studies, SAMHSA, Drug Abuse Warning Network, 2005 (08/2008 update).

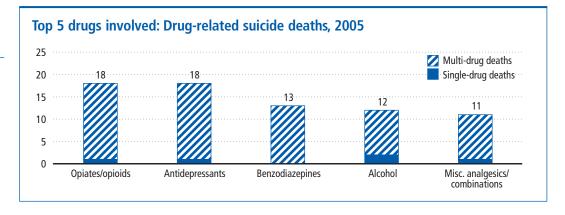
(continued)

State overview: Deaths and population by county, 2005 (continued)

Counties	Drug-related		Drug-relate	Population	
Counties	Deaths	Rate	Deaths	Rate	ropulation
50. Murray County	0	0.0	0	0.0	12,809
51. Muskogee County	4	5.7	1	1.4	70,672
52. Noble County	0	0.0	0	0.0	11,199
53. Nowata County	0	0.0	0	0.0	10,799
54. Okfuskee County	0	0.0	0	0.0	11,404
55. Oklahoma County	53	7.7	8	1.2	684,192
56. Okmulgee County	2	5.0	1	2.5	39,657
57. Osage County	2	4.4	0	0.0	45,342
58. Ottawa County	2	6.1	2	6.1	32,800
59. Pawnee County	4	23.8	0	0.0	16,792
60. Payne County	5	6.8	0	0.0	73,419
61. Pittsburg County	1	2.2	0	0.0	44,564
62. Pontotoc County	3	8.5	0	0.0	35,188
63. Pottawatomie County	3	4.4	1	1.5	68,076
64. Pushmataha County	2	17.1	0	0.0	11,666
65. Roger Mills County	0	0.0	0	0.0	3,309
66. Rogers County	6	7.5	0	0.0	80,509
67. Seminole County	2	8.1	0	0.0	24,638
68. Sequoyah County	3	7.4	1	2.5	40,766
69. Stephens County	0	0.0	0	0.0	42,929
70. Texas County	0	0.0	0	0.0	20,136
71. Tillman County	0	0.0	0	0.0	8,519
72. Tulsa County	64	11.2	8	1.4	570,627
73. Wagoner County	7	10.9	1	1.6	64,177
74. Washington County	6	12.2	1	2.0	48,997
75. Washita County	0	0.0	0	0.0	11,449
76. Woods County	0	0.0	0	0.0	8,481
77. Woodward County	0	0.0	1	5.3	19,009





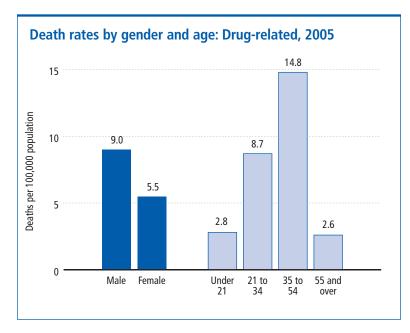


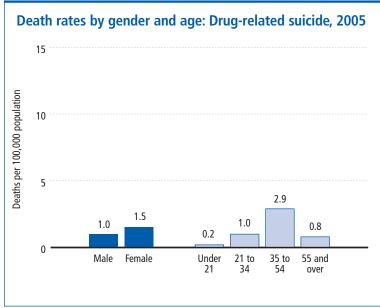


^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Oklahoma





Place of death, 200!	Place	of d	eath.	2005
----------------------	--------------	------	-------	------

Drug-related	Deaths
Health care facility	49
Home	162
Public place	20
Other	18
Not documented	5

Drug-related suicide	Deaths
Health care facility	12
Home	28
Public place	
Other	
Not documented	

Drug-related deaths by drug category, 2004-2005

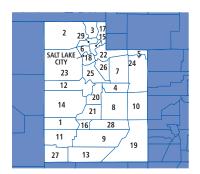
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005
ALL DRUGS		254	75		44	10
Alcohol*		54	14		12	
Cocaine		26	7			
Marijuana		0	0		0	0
Stimulants		44	14		5	0
Club drugs†			0		0	0
Hallucinogens††		0	0		0	0
Inhalants		7	6		0	0
Antidepressants		44			18	
Antipsychotics		14			4	
Benzodiazepines		85			13	0
Misc. anxiolytics, sedatives, and hypnotics		20	0		5	0
Opiates/opioids		171	28		18	
Heroin (specified)			0		0	0
Methadone		66	10			0
All other opiates/opioids		114	18		16	
Nonsteroidal anti-inflammatory agents			0		0	0
Salicylates/combinations			0			
Misc. analgesics/combinations		30			11	
Anticonvulsants		9	0			
Muscle relaxants		34	0		10	0

- * Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.
- † Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.
- tt Includes PCP, LSD, and miscellaneous hallucinogens.

NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.

Utah



Deaths reported to DAWN

Drug-related 389
Drug-related suicide 47

State population, 2005

2,490,334

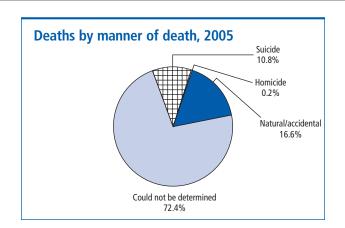
Population covered by DAWN 2.490.334

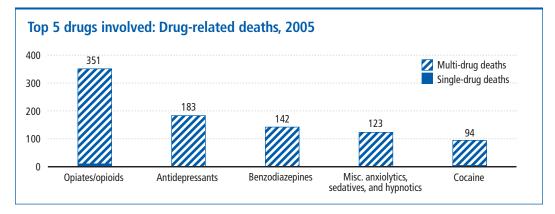
Percent of population covered by DAWN

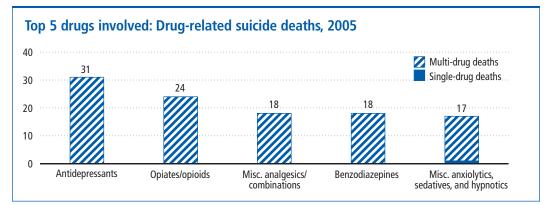
100%

State overview: Deaths and population by county, 2005

		-	_	-	
Counties	Drug-ı	elated	Drug-relat	ed suicide	Population
Counties	Deaths	Rate	Deaths	Rate	Population
Total participating (29)	389	15.6	47	1.9	2,490,334
1. Beaver County	0	0.0	0	0.0	6,202
2. Box Elder County	2	4.3	3	6.5	46,333
3. Cache County	8	8.1	0	0.0	98,358
4. Carbon County	7	36.0	1	5.1	19,459
5. Daggett County	1	106.7	0	0.0	937
6. Davis County	27	10.1	1	0.4	268,084
7. Duchesne County	3	19.6	1	6.5	15,328
8. Emery County	3	28.0	0	0.0	10,711
9. Garfield County	0	0.0	0	0.0	4,443
10. Grand County	1	11.4	0	0.0	8,787
11. Iron County	8	20.8	0	0.0	38,438
12. Juab County	2	21.8	1	10.9	9,165
13. Kane County	1	16.0	0	0.0	6,232
14. Millard County	2	16.3	0	0.0	12,280
15. Morgan County	0	0.0	0	0.0	7,862
16. Piute County	0	0.0	0	0.0	1,371
17. Rich County	0	0.0	0	0.0	2,057
18. Salt Lake County	183	19.1	24	2.5	960,297
19. San Juan County	2	14.2	0	0.0	14,117
20. Sanpete County	4	16.7	0	0.0	23,995
21. Sevier County	6	31.0	0	0.0	19,367
22. Summit County	4	11.4	0	0.0	35,119
23. Tooele County	5	9.8	1	2.0	51,269
24. Uintah County	4	14.7	0	0.0	27,129
25. Utah County	71	15.7	6	1.3	451,855
26. Wasatch County	1	5.3	0	0.0	19,015
27. Washington County	13	10.9	2	1.7	119,188
28. Wayne County	1	40.7	0	0.0	2,454
29. Weber County	30	14.3	7	3.3	210,482

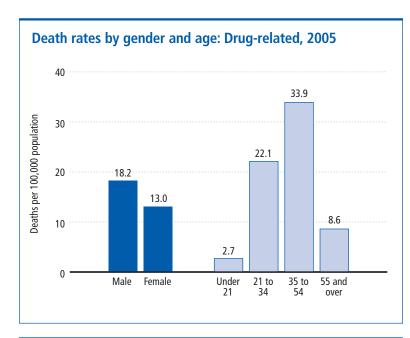


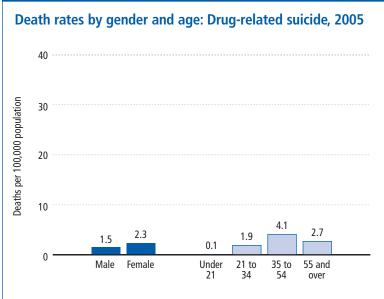




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	112
Home	240
Public place	14
Other	22
Not documented	

Drug-related suicide	Deaths
Health care facility	10
Home	30
Public place	5
Other	
Not documented	0

		Drug-relate	d	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	343	389	15	54	47	
Alcohol*	77	57	0	11	11	
Cocaine	92	94	4			
Marijuana	36	49	0			
Stimulants	69	55	0	6	7	
Club drugs†			0	0	0	
Hallucinogens††		0	0	0	0	
Inhalants			0	0	0	
Antidepressants	139	183	0	33	31	
Antipsychotics	13	35		8	6	
Benzodiazepines	110	142	0	16	18	
Misc. anxiolytics, sedatives, and hypnotics	86	123	0	26	17	
Opiates/opioids	294	351	10	29	24	
Heroin (specified)	30	17	0	0		
Methadone	113	118		10	4	
All other opiates/opioids	214	280	7	23	20	
Nonsteroidal anti-inflammatory agents			0			
Salicylates/combinations		0	0			
Misc. analgesics/combinations	48	54	0	13	18	
Anticonvulsants	20	43	0	4	6	
Muscle relaxants	38	64	0	9	4	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Vermont



Deaths reported to DAWN

Drug-related 72 Drug-related suicide 14

State population, 2005 622,387

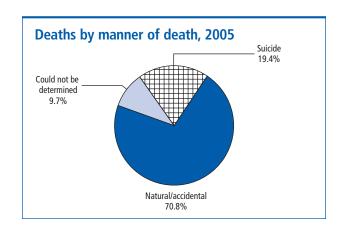
Population covered by DAWN 622.387

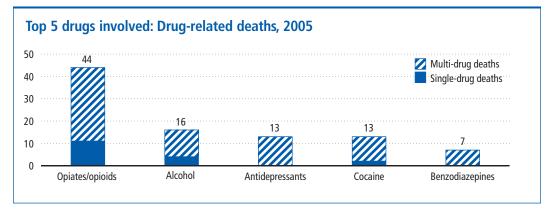
Percent of population covered by DAWN

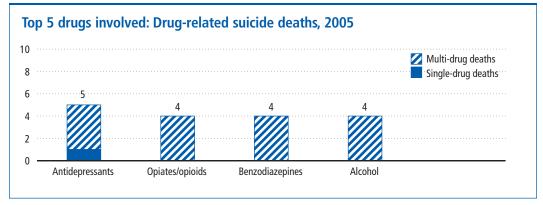
100%

State overview: Deaths and population by county, 2005

Counties	Drug-related		Drug-relate	Damulatian	
Counties	Deaths	Rate	Deaths	Rate	Population
Total participating (14)	72	11.6	14	2.2	622,387
1. Addison County	6	16.2	0	0.0	36,948
2. Bennington County	4	10.9	0	0.0	36,856
3. Caledonia County	3	9.8	1	3.3	30,531
4. Chittenden County	28	18.7	5	3.3	149,550
5. Essex County	1	15.1	0	0.0	6,639
6. Franklin County	3	6.3	2	4.2	47,931
7. Grand Isle County	1	12.9	0	0.0	7,741
8. Lamoille County	1	4.1	0	0.0	24,484
9. Orange County	0	0.0	1	3.4	29,306
10. Orleans County	7	25.4	0	0.0	27,590
11. Rutland County	6	9.4	1	1.6	63,609
12. Washington County	4	6.7	1	1.7	59,428
13. Windham County	4	9.1	3	6.8	43,985
14. Windsor County	4	6.9	0	0.0	57,789

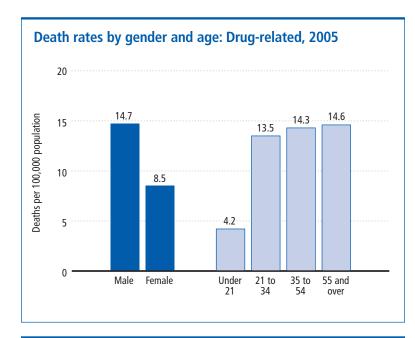


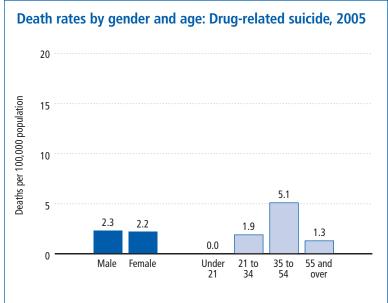




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Deaths
31
29
0
12
0

Drug-related suicide	Deaths
Health care facility	6
Home	8
Public place	0
Other	0
Not documented	0

		Drug-relate	k	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	62	72	34	9	14	5
Alcohol*	17	16	4		4	0
Cocaine	14	13		0	0	0
Marijuana			0	0	0	0
Stimulants	5		0	0	0	0
Club drugs†		0	0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants				0	0	0
Antidepressants	4	13	0		5	
Antipsychotics	0			0		0
Benzodiazepines	6	7	0		4	0
Misc. anxiolytics, sedatives, and hypnotics			0			0
Opiates/opioids	34	44	11	5	4	0
Heroin (specified)	6		0	0	0	0
Methadone	7	17	6	0	0	0
All other opiates/opioids	25	28	5	5	4	0
Nonsteroidal anti-inflammatory agents		0	0	0		0
Salicylates/combinations				0		
Misc. analgesics/combinations			0			
Anticonvulsants	0		0	0		
Muscle relaxants		5	0	0	0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

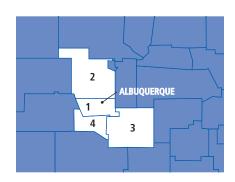
^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

METROPOLITAN AREA PROFILES

Albuquerque, NM



Drug-related 16

Drug-related suicide 20

Metro area population, 2005 797,517

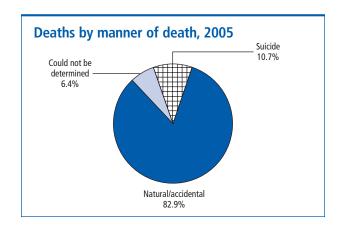
Population covered by DAWN 797,517

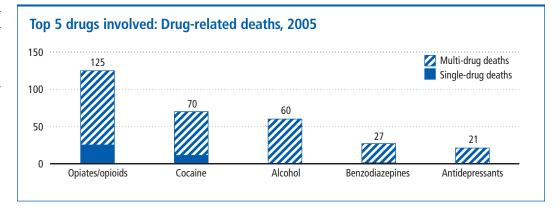
Percent of population covered by DAWN

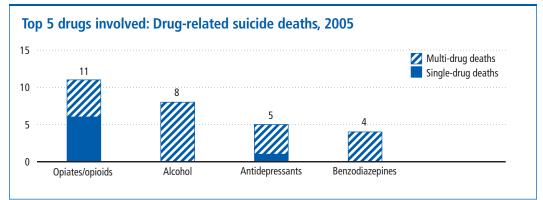
100%

Metro area overview: Deaths and population by county, 2005

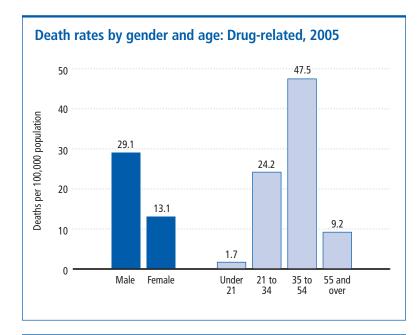
Matra avas component	Drug-related		Drug-related suicide		Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (4)	167	20.9	20	2.5	797,517	
1. Bernalillo County, NM	142	23.5	18	3.0	603,783	
2. Sandoval County, NM	10	9.3	1	0.9	107,146	
3. Torrance County, NM	4	22.9	0	0.0	17,456	
4. Valencia County, NM	11	15.9	1	1.4	69,132	

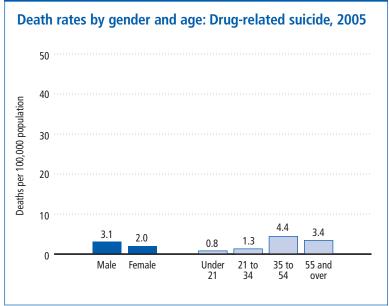






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	33
Home	77
Public place	21
Other	36
Not documented	0

Drug-related suicide	Deaths
Health care facility	4
Home	12
Public place	
Other	
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	147	167	46	17	20	8
Alcohol*	43	60	0	7	8	0
Cocaine	53	70	11			0
Marijuana	0	5	0	0	0	0
Stimulants	12	15	6			0
Club drugs†	0	0	0	0	0	0
Hallucinogens††		0	0	0	0	0
Inhalants	0			0	0	0
Antidepressants	14	21	0	8	5	
Antipsychotics		4	0	0		0
Benzodiazepines	15	27			4	0
Misc. anxiolytics, sedatives, and hypnotics	5	5	0	0		0
Opiates/opioids	108	125	25	11	11	6
Heroin (specified)	41	61	16			
Methadone	29	23	5			0
All other opiates/opioids	49	52	4	8	9	5
Nonsteroidal anti-inflammatory agents			0		0	0
Salicylates/combinations	0	0	0	0		0
Misc. analgesics/combinations	6				0	0
Anticonvulsants		4	0	0		0
Muscle relaxants	4	6	0	0		0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Atlanta-Sandy Springs-Marietta, GA



Drug-related 200
Drug-related suicide 18

Metro area population, 2005 4,972,219

Population covered by DAWN 3,248,432

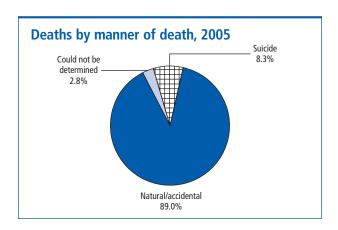
Percent of population covered by DAWN

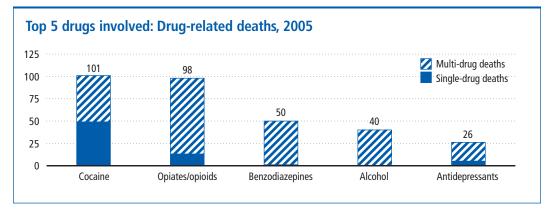
65%

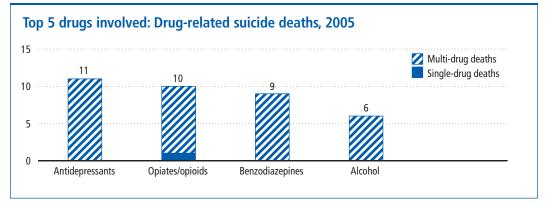
Metro area overview: Deaths and population by county, 2005

	Drug-related		Drug-relate		
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (8)	200	6.2	18	0.6	3,248,432
1. Barrow County, GA					59,920
2. Bartow County, GA					89,049
3. Butts County, GA					22,837
4. Carroll County, GA	22	21.1	2	1.9	104,386
5. Cherokee County, GA					184,360
6. Clayton County, GA					266,614
7. Cobb County, GA	38	5.7	1	0.2	663,528
8. Coweta County, GA					109,769
9. Dawson County, GA					19,825
10. DeKalb County, GA	27	3.8	1	0.1	713,679
11. Douglas County, GA					112,914
12. Fayette County, GA					104,186
13. Forsyth County, GA					140,804
14. Fulton County, GA	76	8.1	9	1.0	934,242
15. Gwinnett County, GA	30	4.1	3	0.4	726,790
16. Haralson County, GA					28,335
17. Heard County, GA	0	0.0	0	0.0	11,336
18. Henry County, GA					168,204
19. Jasper County, GA					13,144
20. Lamar County, GA					16,605
21. Meriwether County, GA					22,754
22. Newton County, GA					86,529
23. Paulding County, GA					112,566
24. Pickens County, GA					28,440
25. Pike County, GA	0	0.0	0	0.0	16,073
26. Rockdale County, GA	7	8.9	2	2.6	78,398
27. Spalding County, GA					61,262
28. Walton County, GA					75,670

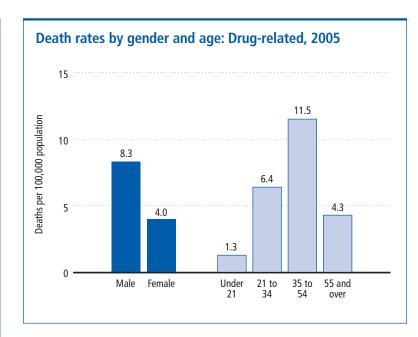
Shaded areas did not participate in DAWN this year.

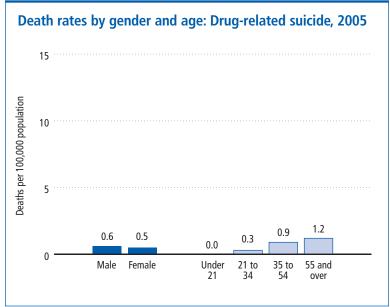






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	50
Home	102
Public place	14
Other	34
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	14
Public place	0
Other	
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005
ALL DRUGS		200	76		18	4
Alcohol*		40	0		6	0
Cocaine		101	49			0
Marijuana			0		0	0
Stimulants		22	5			0
Club drugs†			0		0	0
Hallucinogens††		0	0		0	0
Inhalants					0	0
Antidepressants		26	5		11	0
Antipsychotics			0			0
Benzodiazepines		50			9	0
Misc. anxiolytics, sedatives, and hypnotics		11	0			
Opiates/opioids		98	13		10	
Heroin (specified)			0		0	0
Methadone		33			0	0
All other opiates/opioids		77	12		10	
Nonsteroidal anti-inflammatory agents			0		0	0
Salicylates/combinations		0	0		0	0
			0			
Anticonvulsants			0		0	0
Muscle relaxants		12	0		0	0

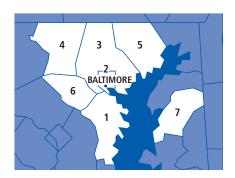
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Baltimore-Towson, MD



Deaths reported to DAWN

Drug-related 477
Drug-related suicide 23

Metro area population, 2005 2,651,069

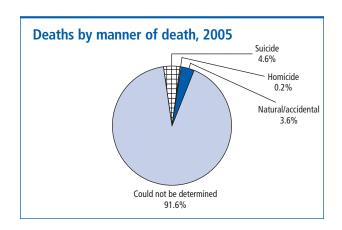
Population covered by DAWN 2,651,069

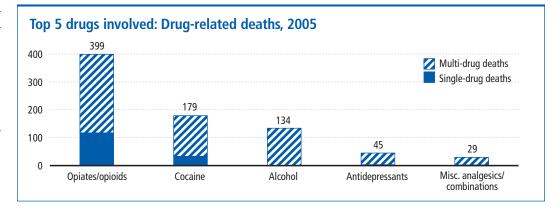
Percent of population covered by DAWN

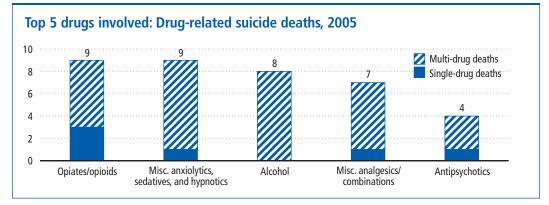
100%

Metro area overview: Deaths and population by county, 2005

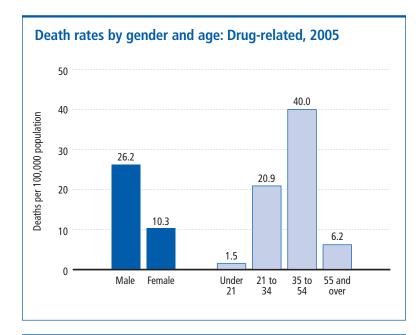
Matra area component	Drug-related		Drug-related suicide		Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (7)	477	18.0	23	0.9	2,651,069	
1. Anne Arundel County, MD	54	10.6	2	0.4	509,397	
2. Baltimore city, MD	285	44.8	2	0.3	636,377	
3. Baltimore County, MD	87	11.1	12	1.5	783,405	
4. Carroll County, MD	11	6.5	2	1.2	168,397	
5. Harford County, MD	25	10.5	2	0.8	238,850	
6. Howard County, MD	13	4.8	3	1.1	269,174	
7. Queen Anne's County, MD	2	4.4	0	0.0	45,469	

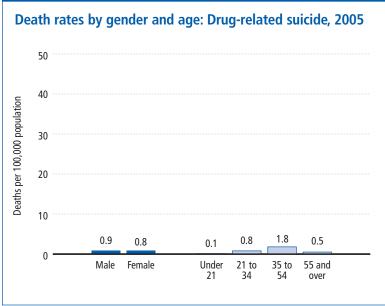






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	193
Home	198
Public place	12
Other	74
Not documented	0

Drug-related suicide	Deaths
Health care facility	6
Home	13
Public place	0
Other	4
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005
ALL DRUGS	468	477	160	23	23	7
Alcohol*	149	134		7	8	0
Cocaine	194	179	33	4		0
Marijuana		0	0	0	0	0
Stimulants			0	0	0	0
Club drugs†			0	0	0	0
Hallucinogens††		5	0	0	0	0
Inhalants		0	0	0	0	0
Antidepressants	67	45		4	4	
Antipsychotics	17	12			4	
Benzodiazepines	18	13	0			0
Misc. anxiolytics, sedatives, and hypnotics	49	29		10	9	
Opiates/opioids	385	399	117	9	9	
Heroin (specified)	68	11	0		0	0
Methadone	107	139	56	0		0
All other opiates/opioids	328	297	61	9	9	
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0
Salicylates/combinations		0	0	0	0	0
Misc. analgesics/combinations	45	29		7	7	
Anticonvulsants			0	0		0
Muscle relaxants	11	9		0		0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Barnstable Town, MA



Drug-related 33
Drug-related suicide 4

Metro area population, 2005 226,161

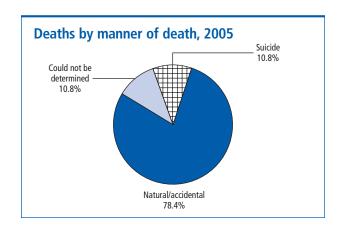
Population covered by DAWN 226,161

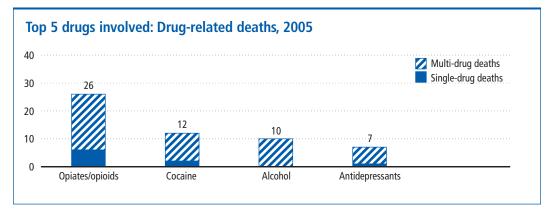
Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	33	14.6	4	1.8	226,161
1. Barnstable County, MA	33	14.6	4	1.8	226,161

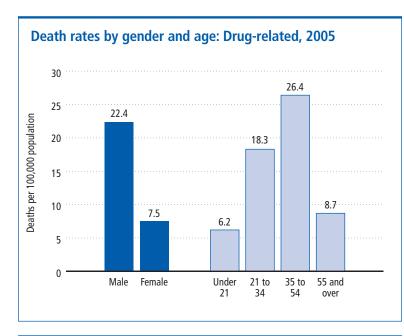


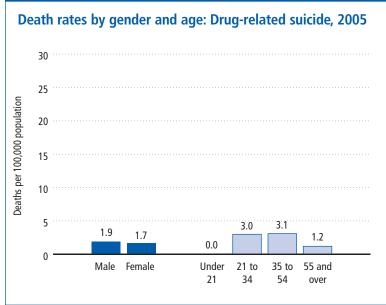


Top 5 drugs involved: Drug-related suicide deaths, 2005 No single drug had 4 or more deaths.

NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	13
Home	13
Public place	
Other	5
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	
Public place	
Other	
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS		33	11		4	0
Alcohol*		10	0			
Cocaine		12				
Marijuana			0		0	
Stimulants		0	0		0	
Club drugs†		0	0		0	
Hallucinogens ^{††}		0	0		0	
Inhalants		0	0		0	
Antidepressants		7				
Antipsychotics			0			
Benzodiazepines			0			
Misc. anxiolytics, sedatives, and hypnotics			0		0	
Opiates/opioids		26	6			
Heroin (specified)		4			0	
Methadone		5			0	
All other opiates/opioids		19				
Nonsteroidal anti-inflammatory agents		0	0		0	
Salicylates/combinations		0	0		0	
Misc. analgesics/combinations		0	0		0	
Anticonvulsants		0	0		0	
Muscle relaxants		0	0		0	•••••

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Birmingham-Hoover, AL



Drug-related 7

Drug-related suicide 5

Metro area population, 2005 1,088,218

Population covered by DAWN 656,014

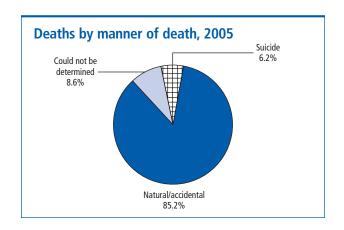
Percent of population covered by DAWN

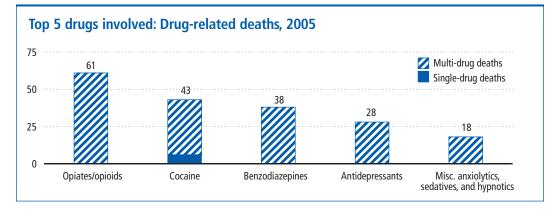
60%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-related suicide		Damulatian
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	76	11.6	5	0.8	656,014
1. Bibb County, AL					21,454
2. Blount County, AL					55,572
3. Chilton County, AL					41,648
4. Jefferson County, AL	76	11.6	5	0.8	656,014
5. Shelby County, AL					171,373
6. St. Clair County, AL					72,177
7. Walker County, AL					69,980

Shaded areas did not participate in DAWN this year.

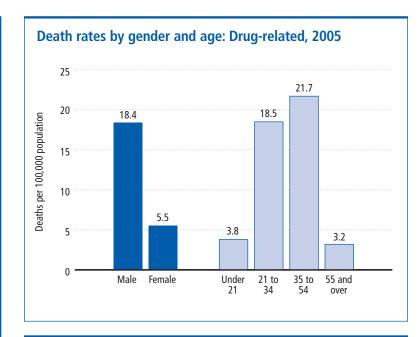


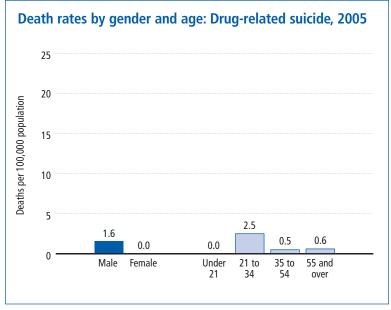


Top 5 drugs involved: Drug-related suicide deaths, 2005 No single drug had 4 or more deaths.

NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	8
Home	42
Public place	4
Other	22
Not documented	0

Drug-related suicide	Deaths
Health care facility	0
Home	5
Public place	0
Other	0
Not documented	0

		Drug-relate	t	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	96	76	6	12	5	0
Alcohol*	23	12	0	4		
Cocaine	56	43	6	5		
Marijuana			0	0	0	
Stimulants	4	4	0	0	0	
Club drugs†			0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	25	28	0	5		
Antipsychotics		7	0			
Benzodiazepines	38	38	0	4		
Misc. anxiolytics, sedatives, and hypnotics	14	18	0			
Opiates/opioids	61	61	0	4		
Heroin (specified)			0	0	0	
Methadone	28	41	0		0	
All other opiates/opioids	45	26	0			
Nonsteroidal anti-inflammatory agents		0	0	0	0	
Salicylates/combinations			0	0	0	
Misc. analgesics/combinations	6		0	0		
Anticonvulsants			0		0	
Muscle relaxants	8		0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

Boston-Cambridge-Quincy, MA-NH



Deaths reported to DAWN
Drug-related 56

Drug-related suicide 56

Metro area population, 2005 4,448,884

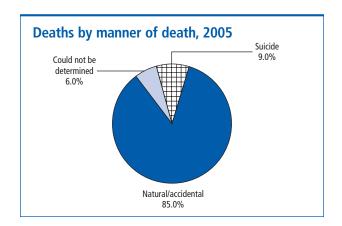
Population covered by DAWN 4,448,884

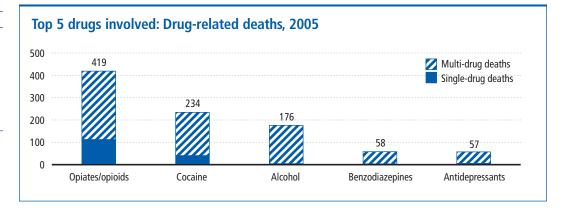
Percent of population covered by DAWN

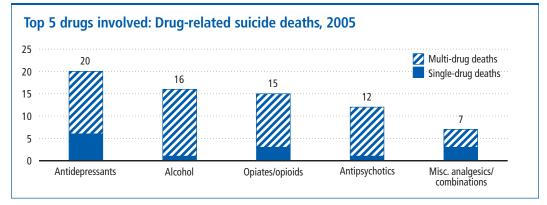
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (7)	564	12.7	56	1.3	4,448,884
1. Essex County, MA	116	15.8	11	1.5	734,261
2. Middlesex County, MA	150	10.2	20	1.4	1,464,985
3. Norfolk County, MA	60	9.2	11	1.7	652,530
4. Plymouth County, MA	65	13.2	7	1.4	491,934
5. Suffolk County, MA	155	22.4	3	0.4	691,965
6. Rockingham County, NH	9	3.1	3	1.0	294,211
7. Strafford County, NH	9	7.6	1	0.8	118,998

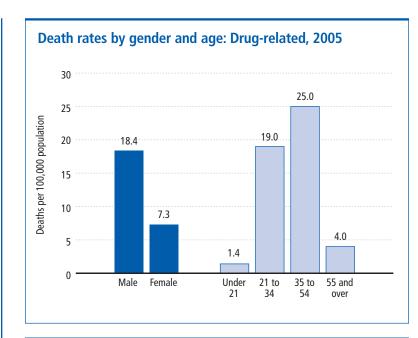


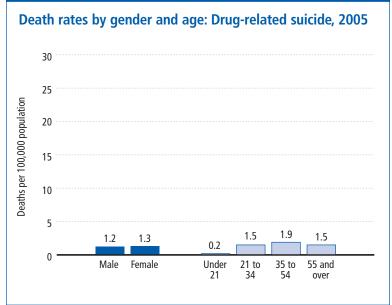




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	225
Home	237
Public place	20
Other	77
Not documented	5

Drug-related suicide	Deaths
Health care facility	8
Home	32
Public place	
Other	10
Not documented	

		Drug-relate	t	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	445	564	193	50	56	21
Alcohol*	127	176	4	16	16	
Cocaine	164	234	40	12	5	
Marijuana	7	10	0		0	0
Stimulants	4	7		0	0	0
Club drugs†		4		0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants		0	0		0	0
Antidepressants	47	57	5	10	20	6
Antipsychotics	7	21		11	12	
Benzodiazepines	40	58		7	6	0
Misc. anxiolytics, sedatives, and hypnotics	5	9	0	6	5	
Opiates/opioids	323	419	112	8	15	
Heroin (specified)	142	101	37	0	0	0
Methadone	40	74	16	0		0
All other opiates/opioids	155	273	59	8	15	
Nonsteroidal anti-inflammatory agents	0		0	0		0
Salicylates/combinations	0	5		0		
Misc. analgesics/combinations	8	11		4	7	
Anticonvulsants		0	0	0		0
Muscle relaxants					0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

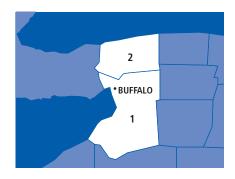
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Buffalo-Niagara Falls, NY



Deaths reported to DAWN
Drug-related 10

Drug-related suicide 13

Metro area population, 2005 1,144,796

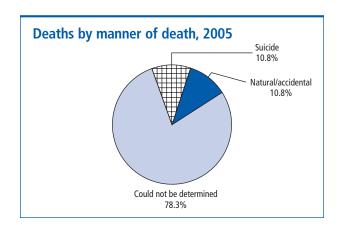
Population covered by DAWN 1,144,796

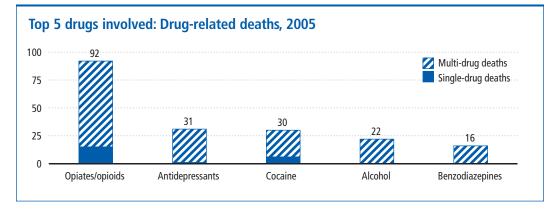
Percent of population covered by DAWN

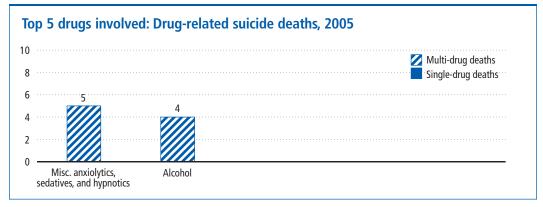
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Population	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (2)	107	9.3	13	1.1	1,144,796
1. Erie County, NY	82	8.8	11	1.2	928,215
2. Niagara County, NY	25	11.5	2	0.9	216,581

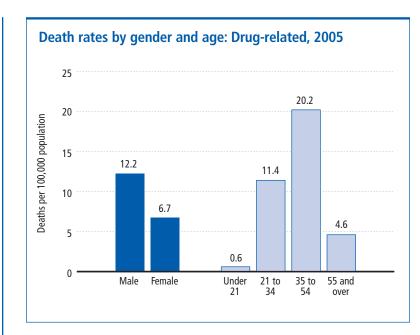


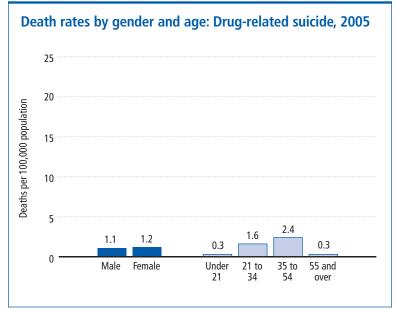




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	37
Home	55
Public place	5
Other	10
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	10
Public place	
Other	0
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	100	107	23	10	13	
Alcohol*	34	22	0	4	4	
Cocaine	33	30	6	0		
Marijuana	13	16	0	0	0	
Stimulants	0		0	0	0	
Club drugs†	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0		
Antidepressants	25	31		4		
Antipsychotics	7	4				
Benzodiazepines	29	16	0			
Misc. anxiolytics, sedatives, and hypnotics	18	11	0	4	5	
Opiates/opioids	84	92	15	5		
Heroin (specified)	27	27	7	0	0	
Methadone	7	21		0	0	
All other opiates/opioids	63	54	7	5		
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	
Salicylates/combinations	0	0	0	0		
Misc. analgesics/combinations		9	0			
Anticonvulsants	6		0	0	0	
Muscle relaxants	9		0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Burlington-South Burlington, VT



Drug-related suicide 7

Metro area population, 2005 205,222

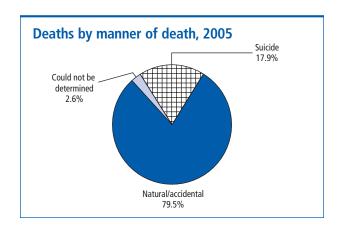
Population covered by DAWN 205.222

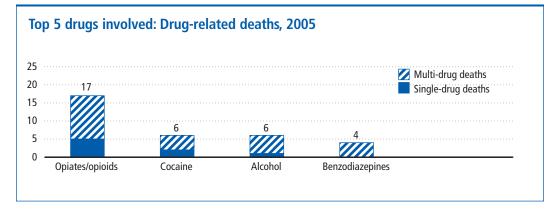
Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	Drug-related		Drug-related suicide	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (3)	32	15.6	7	3.4	205,222
1. Chittenden County, VT	28	18.7	5	3.3	149,550
2. Franklin County, VT	3	6.3	2	4.2	47,931
3. Grand Isle County, VT	1	12.9	0	0.0	7,741



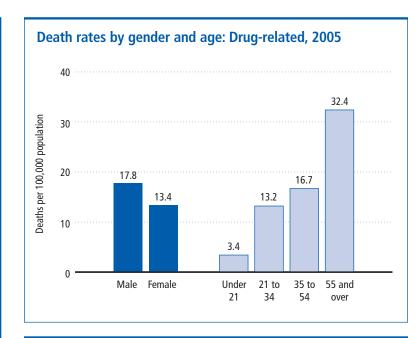


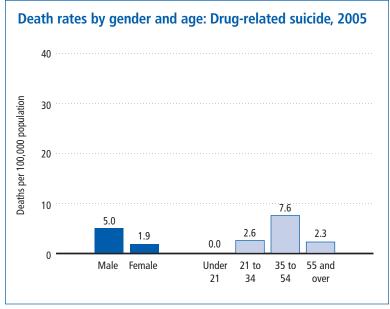
Top 5 drugs involved: Drug-related suicide deaths, 2005

No single drug had 4 or more deaths.

NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	17
Home	10
Public place	0
Other	5
Not documented	0

Drug-related suicide	Deaths
Health care facility	4
Home	
Public place	0
Other	0
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS		32	19		7	
Alcohol*		6				
Cocaine		6			0	
Marijuana		0	0		0	
Stimulants		0	0		0	
Club drugs†		0	0		0	
Hallucinogens††		0	0		0	
Inhalants		0	0		0	
Antidepressants			0			
Antipsychotics			0			
Benzodiazepines		4	0			
Misc. anxiolytics, sedatives, and hypnotics		0	0		0	
Opiates/opioids		17	5			
Heroin (specified)			0		0	
Methadone		6			0	
All other opiates/opioids		11				
Nonsteroidal anti-inflammatory agents		0	0			
Salicylates/combinations						
Misc. analgesics/combinations		0	0			
Anticonvulsants		0	0			
Muscle relaxants			0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Chicago-Naperville-Joliet, IL-IN-WI



Deaths reported to DAWN

Drug-related 772

Drug-related suicide 69

Metro area population, 2005 9,446,565

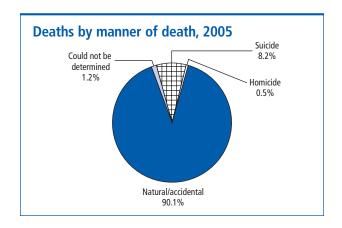
Population covered by DAWN 8,007,898

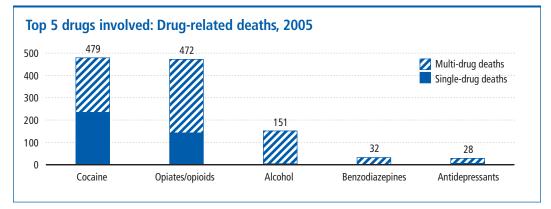
Percent of population covered by DAWN 85%

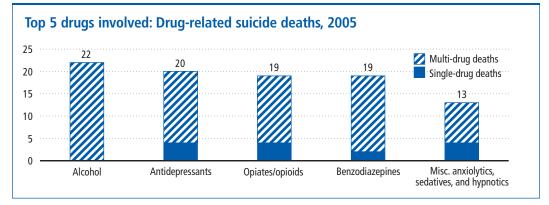
Metro area overview: Deaths and population by county, 2005

pulation 007,898
007.898
,
303,943
97,770
931,219
43,736
483,208
79,597
704,086
304,701
642,625
31,761
491,706
14,423
157,408
160,382
303,943 97,770 931,219 43,736 483,208 79,597 704,086 304,701 642,625 31,761 491,706 14,423 157,408

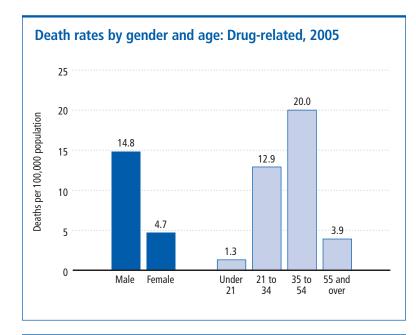
Shaded areas did not participate in DAWN this year.

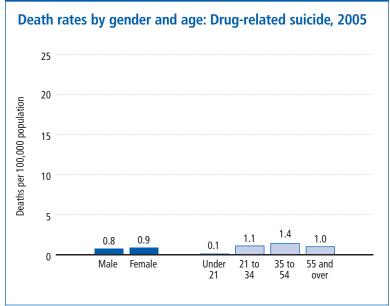






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	339
Home	317
Public place	46
Other	66
Not documented	4

Drug-related suicide	Deaths
Health care facility	19
Home	34
Public place	5
Other	11
Not documented	0

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS		772	393		69	23
Alcohol*		151	4		22	0
Cocaine		479	234		4	
Marijuana		19	0			0
Stimulants			0			
Club drugs†			0			0
Hallucinogens††		0	0		0	0
Inhalants						
Antidepressants		28	6		20	4
Antipsychotics					6	
Benzodiazepines		32	0		19	
Misc. anxiolytics, sedatives, and hypnotics		18	0		13	4
Opiates/opioids		472	142		19	4
Heroin (specified)		45	8			0
Methadone		60	23			
All other opiates/opioids		387	111		18	
Nonsteroidal anti-inflammatory agents		0	0			0
Salicylates/combinations						0
Misc. analgesics/combinations		6	0		11	
Anticonvulsants		4				0
Muscle relaxants		4	0			0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Cleveland-Elyria-Mentor, OH



Deaths reported to DAWN
Drug-related 18

Drug-related suicide 32

Metro area population, 2005 2,125,138

Population covered by DAWN 1,330,428

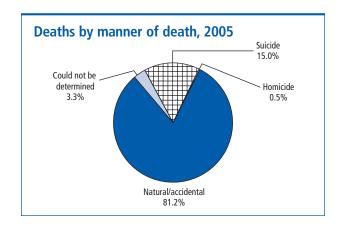
Percent of population covered by DAWN

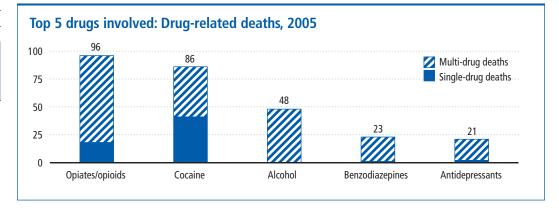
63%

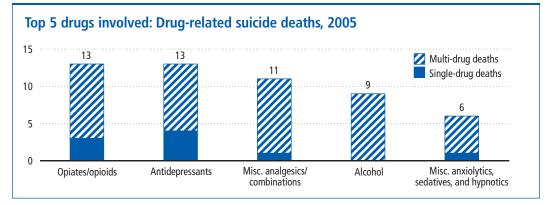
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-related suicide		Population	
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (1)	181	13.6	32	2.4	1,330,428	
1. Cuyahoga County, OH	181	13.6	32	2.4	1,330,428	
2. Geauga County, OH					95,060	
3. Lake County, OH					232,416	
4. Lorain County, OH					300,266	
5. Medina County, OH					166,968	

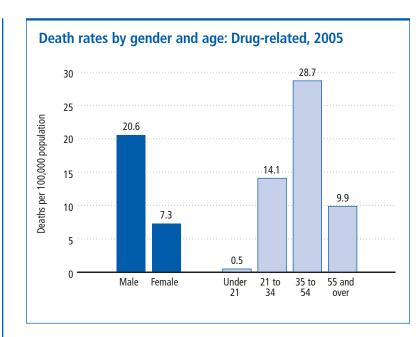
Shaded areas did not participate in DAWN this year.

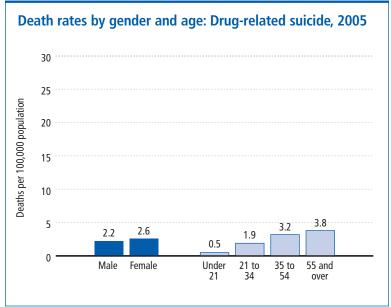






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	81
Home	91
Public place	
Other	7
Not documented	0

Drug-related suicide	Deaths
Health care facility	13
Home	17
Public place	
Other	
Not documented	0

Drug category		Drug-related	t	Drug-related su		
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	185	181	78	25	32	14
Alcohol*	31	48	0	9	9	0
Cocaine	103	86	41		0	0
Marijuana	4	0	0		0	0
Stimulants		0	0	0	0	0
Club drugs†		0	0	0	0	0
Hallucinogens††	0			0	0	0
Inhalants		0	0	0		
Antidepressants	14	21		9	13	4
Antipsychotics		7		0	4	0
Benzodiazepines	14	23		4		0
Misc. anxiolytics, sedatives, and hypnotics	12	13		4	6	
Opiates/opioids	87	96	18	8	13	
Heroin (specified)	37	37	7	0	0	0
Methadone	6	16	4	0		0
All other opiates/opioids	54	66	7	8	13	
Nonsteroidal anti-inflammatory agents	0		0	0	0	0
Salicylates/combinations	0		0			
Misc. analgesics/combinations	13	13		7	11	
Anticonvulsants	0				0	0
Muscle relaxants	5	7	0			0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

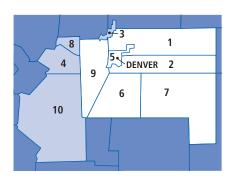
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Denver-Aurora, CO



Drug-related 314
Drug-related suicide 62

Metro area population, 2005 2,361,778

Population covered by DAWN 2,287,309

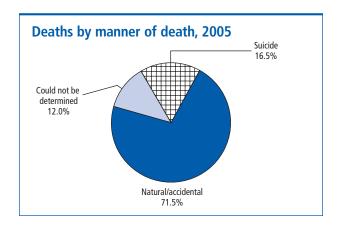
Percent of population covered by DAWN

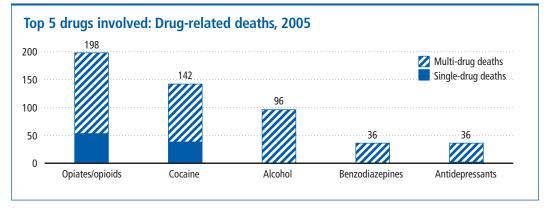
97%

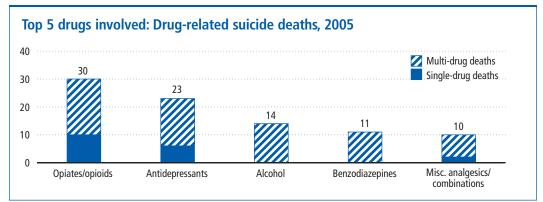
Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-r	elated	Drug-related suicide		Population	
wetro area component	Deaths	Rate	Deaths	Rate	ropulation	
Total participating (6)	314	13.7	62	2.7	2,287,309	
1. Adams County, CO	64	15.9	17	4.2	402,219	
2. Arapahoe County, CO	51	9.6	9	1.7	529,305	
3. Broomfield County, CO					43,376	
4. Clear Creek County, CO					9,196	
5. Denver County, CO	152	27.2	26	4.7	558,663	
6. Douglas County, CO	8	3.2	1	0.4	249,572	
7. Elbert County, CO	3	13.2	0	0.0	22,741	
8. Gilpin County, CO					4,953	
9. Jefferson County, CO	36	6.9	9	1.7	524,809	
10. Park County, CO					16,944	

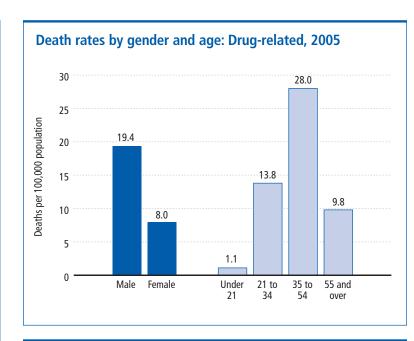
Shaded areas did not participate in DAWN this year.

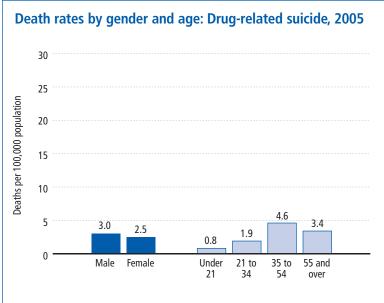






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	66
Home	173
Public place	27
Other	48
Not documented	0

Drug-related suicide	Deaths
Health care facility	12
Home	41
Public place	6
Other	
Not documented	0

Drug category		Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005		
ALL DRUGS		314	106		62	24		
Alcohol*		96	0		14	0		
Cocaine		142	38					
Marijuana		7	0			0		
Stimulants		29	7			0		
Club drugs†			0		0	0		
Hallucinogens††		0	0		0	0		
Inhalants		6						
Antidepressants		36			23	6		
Antipsychotics		7	0			0		
Benzodiazepines		36	0		11	0		
Misc. anxiolytics, sedatives, and hypnotics		15	0		8			
Opiates/opioids		198	53		30	10		
Heroin (specified)		14						
Methadone		34	13		9			
All other opiates/opioids		159	38		20	7		
Nonsteroidal anti-inflammatory agents		0	0			0		
Salicylates/combinations								
Misc. analgesics/combinations		19			10			
Anticonvulsants		4	0			0		
Muscle relaxants		7	0			0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Detroit-Warren-Livonia, MI



Deaths reported to DAWN

Drug-related 719

Drug-related suicide 53

Metro area population, 2005 4,479,254

Population covered by DAWN 4,204,630

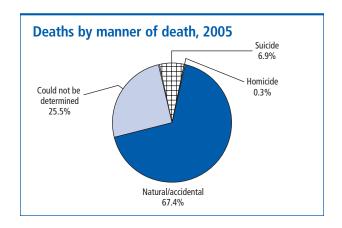
Percent of population covered by DAWN

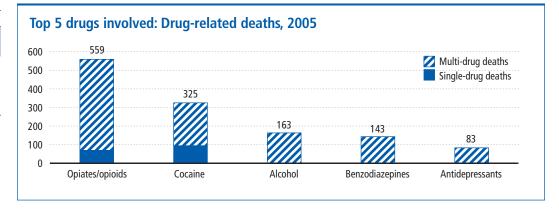
94%

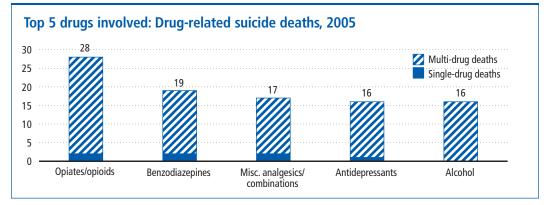
Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-r	elated	Drug-related suicide		Donulation	
	Deaths	Rate	Deaths	Rate	Population	
Total participating (4)	719	17.1	53	1.3	4,204,630	
1. Lapeer County, MI					93,220	
2. Livingston County, MI					181,404	
3. Macomb County, MI	111	13.4	16	1.9	828,950	
4. Oakland County, MI	144	11.9	17	1.4	1,213,669	
5. St. Clair County, MI	26	15.2	0	0.0	171,079	
6. Wayne County, MI	438	22.0	20	1.0	1,990,932	

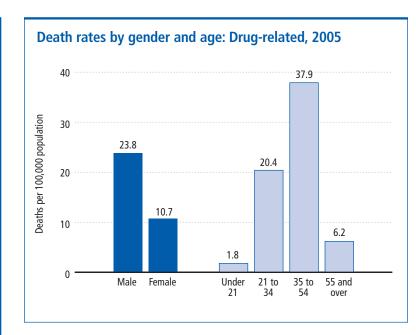
Shaded areas did not participate in DAWN this year.

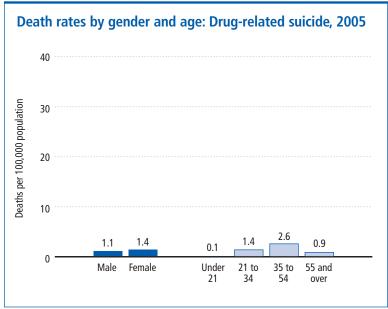






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	239
Home	390
Public place	10
Other	79
Not documented	

Drug-related suicide	Deaths
Health care facility	8
Home	31
Public place	4
Other	10
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	645	719	171	51	53	9	
Alcohol*	157	163	0	17	16	0	
Cocaine	322	325	94	9	8	0	
Marijuana	46	45	0	9	4	0	
Stimulants	4	6	0	0		0	
Club drugs†		4	0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants	4	5		0	0	0	
Antidepressants	142	83		19	16		
Antipsychotics	35	22		8	5	0	
Benzodiazepines	194	143	0	17	19		
Misc. anxiolytics, sedatives, and hypnotics	118	50	0	7	14		
Opiates/opioids	514	559	69	21	28		
Heroin (specified)	194	108	0	0		0	
Methadone	82	95	13			0	
All other opiates/opioids	465	511	56	19	27		
Nonsteroidal anti-inflammatory agents			0	0	0	0	
Salicylates/combinations		0	0			0	
Misc. analgesics/combinations	30	41	4	6	17		
Anticonvulsants	12	6	0			0	
Muscle relaxants	45	35	0	5		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

Houston-Sugar Land-Baytown, TX



Drug-related 441
Drug-related suicide 70

Metro area population, 2005 5,352,569

Population covered by DAWN 3,762,844

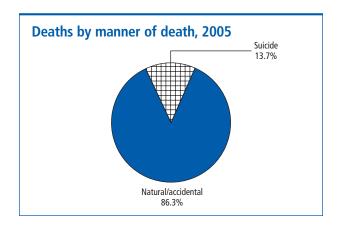
Percent of population covered by DAWN

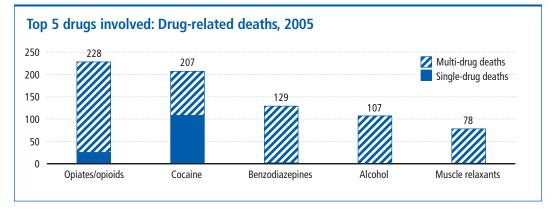
70%

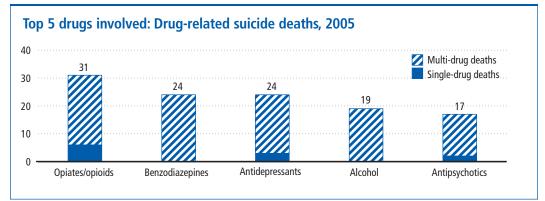
Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-related		Drug-relate	Population	
wetro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	441	11.7	70	1.9	3,762,844
1. Austin County, TX					26,018
2. Brazoria County, TX					277,821
3. Chambers County, TX					28,491
4. Fort Bend County, TX					466,231
5. Galveston County, TX					277,330
6. Harris County, TX	441	11.7	70	1.9	3,762,844
7. Liberty County, TX					75,221
8. Montgomery County, TX					379,028
9. San Jacinto County, TX					24,784
10. Waller County, TX					34,801

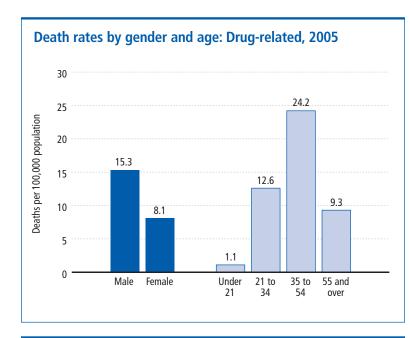
Shaded areas did not participate in DAWN this year.

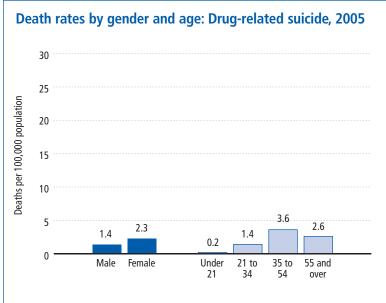






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





hs
5
3
)

Drug-related suicide	Deaths
Health care facility	21
Home	39
Public place	
Other	8
Not documented	0

	Drug-related			Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	346	441	159	67	70	17	
Alcohol*	83	107	0	14	19	0	
Cocaine	174	207	108	12	6		
Marijuana	4		0	0	0	0	
Stimulants	6	17	7		0	0	
Club drugs†	5	7		0	0	0	
Hallucinogens††	7	4			0	0	
Inhalants				0			
Antidepressants	32	39		20	24		
Antipsychotics	6	13		4	17		
Benzodiazepines	84	129		24	24	0	
Misc. anxiolytics, sedatives, and hypnotics	40	26	0	10	16		
Opiates/opioids	181	228	25	32	31	6	
Heroin (specified)	29	27	8		0	0	
Methadone	47	48	10		5		
All other opiates/opioids	130	167	7	27	27		
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations	0				0	0	
Misc. analgesics/combinations	10	20	5	4	13		
Anticonvulsants		10		0	4	0	
Muscle relaxants	50	78		12	13	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

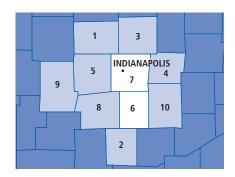
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Indianapolis-Carmel, IN



Deaths reported to DAWN

Drug-related 67

Drug-related suicide 12

Metro area population, 2005 1,640,029

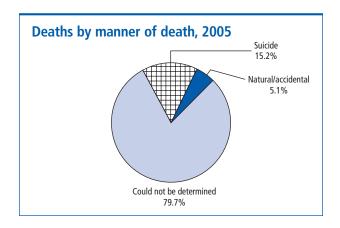
Population covered by DAWN 991.583

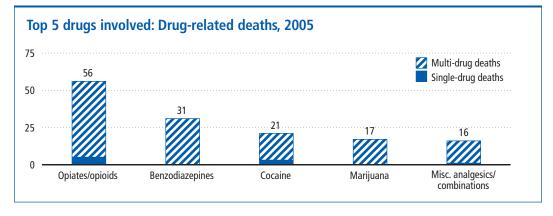
Percent of population covered by DAWN 60%

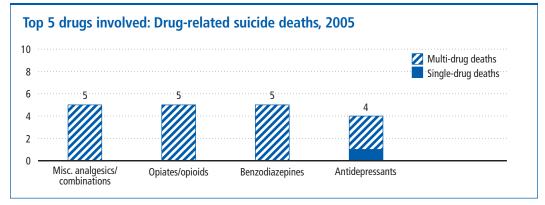
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Population	
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (2)	67	6.8	12	1.2	991,583
1. Boone County, IN					51,918
2. Brown County, IN					15,123
3. Hamilton County, IN					240,732
4. Hancock County, IN					62,972
5. Hendricks County, IN					127,261
6. Johnson County, IN	8	6.2	1	8.0	129,823
7. Marion County, IN	59	6.8	11	1.3	861,760
8. Morgan County, IN					69,751
9. Putnam County, IN					36,914
10. Shelby County, IN					43,775

Shaded areas did not participate in DAWN this year.

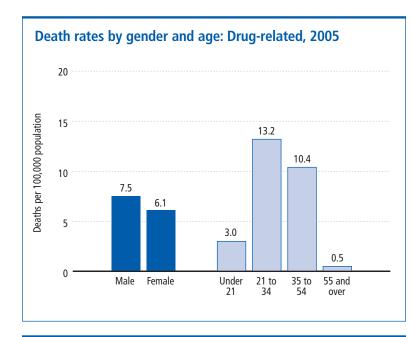


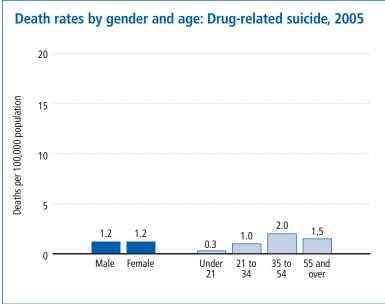




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	10
Home	35
Public place	0
Other	22
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	8
Public place	
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	108	67	10	19	12		
Alcohol*	28	13	0				
Cocaine	44	21			0		
Marijuana	14	17	0		0		
Stimulants	9			0			
Club drugs†		0	0	0	0		
Hallucinogens††	0		0		0		
Inhalants	0	0	0	0	0		
Antidepressants	18	13	0	8	4		
Antipsychotics	0	0	0		0		
Benzodiazepines	25	31	0	7	5		
Misc. anxiolytics, sedatives, and hypnotics	11	6	0	4			
Opiates/opioids	72	56	5	12	5		
Heroin (specified)	6	4	0	0	0		
Methadone	17	15			0		
All other opiates/opioids	61	46	4	10	5		
Nonsteroidal anti-inflammatory agents	0	0	0				
Salicylates/combinations	0		0	0	0		
Misc. analgesics/combinations	24	16		5	5		
Anticonvulsants			0				
Muscle relaxants	7	4	0				

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

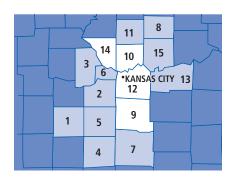
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Kansas City, MO-KS



Drug-related DAWN

Drug-related suicide 20

Metro area population, 2005 1,944,690

Population covered by DAWN 1,039,655

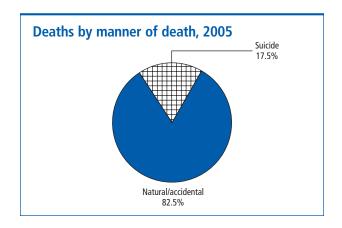
Percent of population covered by DAWN

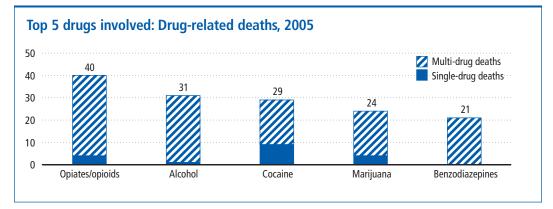
53%

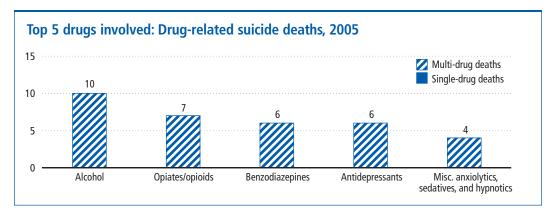
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Donulation		
Metro area component	Deaths	Rate	Deaths Rate		Population	
Total participating (4)	94	9.0	20	1.9	1,039,655	
1. Franklin County, KS					26,179	
2. Johnson County, KS					506,172	
3. Leavenworth County, KS					72,754	
4. Linn County, KS					9,954	
5. Miami County, KS					30,385	
6. Wyandotte County, KS					155,704	
7. Bates County, MO					16,989	
8. Caldwell County, MO					9,232	
9. Cass County, MO	3	3.2	2	2.1	93,752	
10. Clay County, MO	13	6.4	2	1.0	201,681	
11. Clinton County, MO					20,673	
12. Jackson County, MO	75	11.3	15	2.3	662,133	
13. Lafayette County, MO					33,104	
14. Platte County, MO	3	3.7	1	1.2	82,089	
15. Ray County, MO					23,889	

Shaded areas did not participate in DAWN this year.

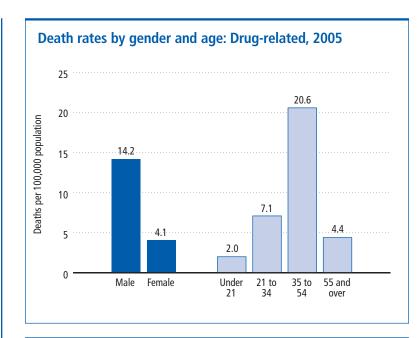


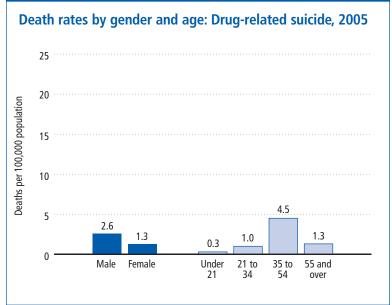




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	21
Home	50
Public place	
Other	20
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	17
Public place	0
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS		94	26		20	4	
Alcohol*		31			10	0	
Cocaine		29	9			0	
Marijuana		24	4			0	
Stimulants		10	5				
Club drugs†					0	0	
Hallucinogens††		0	0		0	0	
Inhalants			0			0	
Antidepressants		16			6	0	
Antipsychotics			0			0	
Benzodiazepines		21	0		6	0	
Misc. anxiolytics, sedatives, and hypnotics		9			4	0	
Opiates/opioids		40	4		7	0	
Heroin (specified)		0	0		0	0	
Methadone		20			0	0	
All other opiates/opioids		24			7	0	
Nonsteroidal anti-inflammatory agents			0		0	0	
Salicylates/combinations			0				
Misc. analgesics/combinations		6	0				
Anticonvulsants			0			0	
Muscle relaxants		4	0		0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Los Angeles-Long Beach-Santa Ana, CA



Drug-related 1,088
Drug-related suicide 132

Metro area population, 2005 12,933,839

Population covered by DAWN 9,941,197

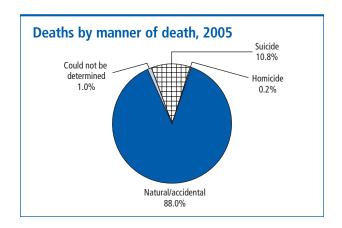
Percent of population covered by DAWN

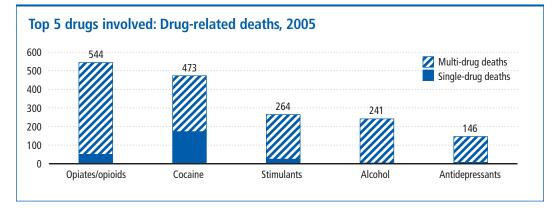
77%

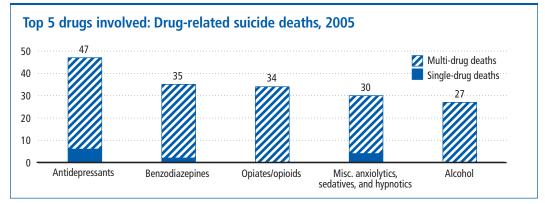
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Population	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	1,088	10.9	132	1.3	9,941,197
1. Los Angeles County, CA	1,088	10.9	132	1.3	9,941,197
2. Orange County, CA					2,992,642

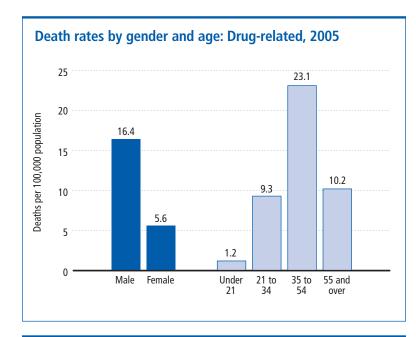
Shaded areas did not participate in DAWN this year.

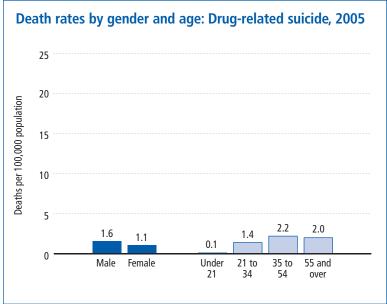






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	389
Home	349
Public place	80
Other	270
Not documented	0

Drug-related suicide	Deaths
Health care facility	25
Home	79
Public place	9
Other	19
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	1,040	1,088	296	167	132	24	
Alcohol*	166	241		25	27	0	
Cocaine	440	473	172	21	17		
Marijuana	48	60	20	4	7		
Stimulants	207	264	24	28	24	0	
Club drugs†	9	14			0	0	
Hallucinogens††	15	17	4	0		0	
Inhalants	7		0	5		0	
Antidepressants	133	146	7	65	47	6	
Antipsychotics	56	45		17	16		
Benzodiazepines	82	90	0	34	35		
Misc. anxiolytics, sedatives, and hypnotics	84	92		35	30	4	
Opiates/opioids	546	544	50	50	34	0	
Heroin (specified)	279	215	4	4	0	0	
Methadone	59	58	6			0	
All other opiates/opioids	498	501	40	50	32	0	
Nonsteroidal anti-inflammatory agents	9	7	0			0	
Salicylates/combinations	4	4			4		
Misc. analgesics/combinations	27	29		14	16		
Anticonvulsants	30	33		9	4	0	
Muscle relaxants	29	28	0	10	6	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Louisville-Jefferson County, KY-IN



Deaths reported to DAWN

Drug-related 76

Drug-related suicide 9

Metro area population, 2005 1,210,182

Population covered by DAWN 699.051

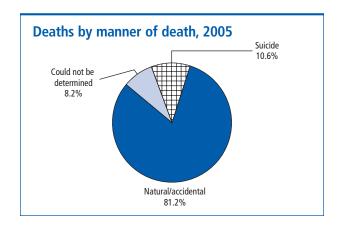
Percent of population covered by DAWN

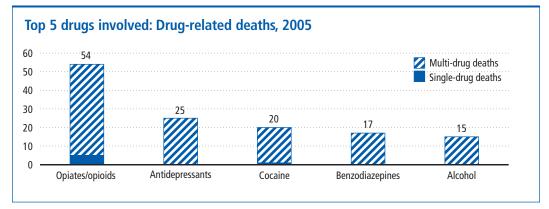
58%

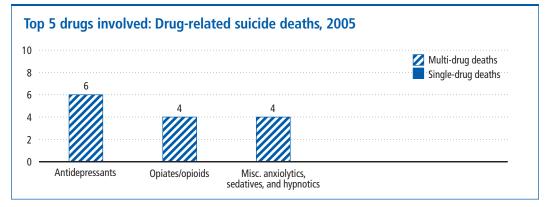
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relate	Population	
Metro area component	Deaths	Rate	Deaths Rate		
Total participating (1)	76	10.9	9	1.3	699,051
1. Clark County, IN					101,625
2. Floyd County, IN					72,025
3. Harrison County, IN					36,729
4. Washington County, IN					27,817
5. Bullitt County, KY					71,440
6. Henry County, KY					15,824
7. Jefferson County, KY	76	10.9	9	1.3	699,051
8. Meade County, KY					28,257
9. Nelson County, KY					41,066
10. Oldham County, KY					53,459
11. Shelby County, KY					38,216
12. Spencer County, KY					15,637
13. Trimble County, KY					9,036

Shaded areas did not participate in DAWN this year.

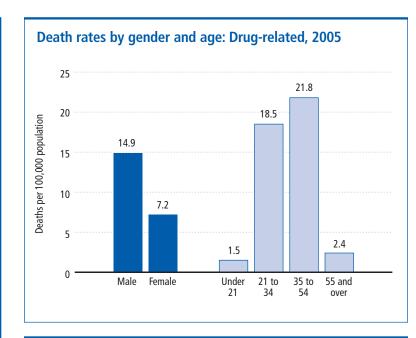


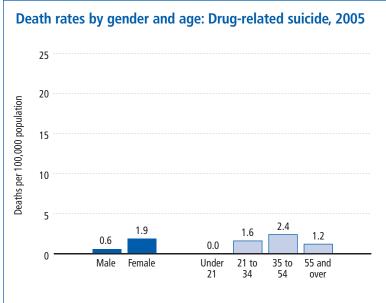




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	28
Home	39
Public place	5
Other	4
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	5
Public place	
Other	0
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	57	76	7	9	9	0	
Alcohol*	6	15	0				
Cocaine	13	20		0	0		
Marijuana	0	0	0	0	0		
Stimulants			0	0	0		
Club drugs†	0		0	0	0		
Hallucinogens††	0	0	0	0	0		
Inhalants	0	0	0	0	0		
Antidepressants	15	25	0	7	6		
Antipsychotics		8		0			
Benzodiazepines	15	17	0				
Misc. anxiolytics, sedatives, and hypnotics	8	10	0		4		
Opiates/opioids	43	54	5		4		
Heroin (specified)	0	0	0	0	0		
Methadone	27	31		0			
All other opiates/opioids	24	33	4				
Nonsteroidal anti-inflammatory agents	0	0	0	0	0		
Salicylates/combinations	0	0	0		0		
Misc. analgesics/combinations	7		0		0		
Anticonvulsants	0		0	0	0		
Muscle relaxants	0	0	0	0	0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Milwaukee-Waukesha-West Allis, WI



Drug-related 164
Drug-related suicide 17

Metro area population, 2005 1,509,388

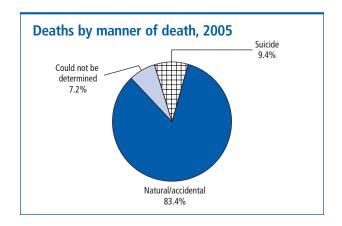
Population covered by DAWN 918.673

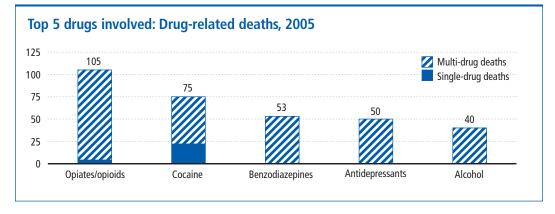
Percent of population covered by DAWN 61%

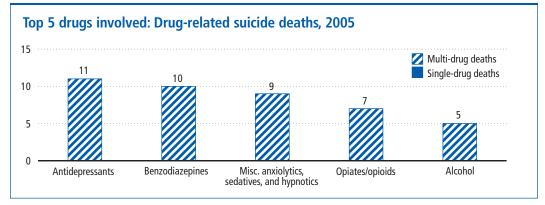
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	164	17.9	17	1.9	918,673
1. Milwaukee County, WI	164	17.9	17	1.9	918,673
2. Ozaukee County, WI					85,983
3. Washington County, WI					125,928
4. Waukesha County, WI					378,804

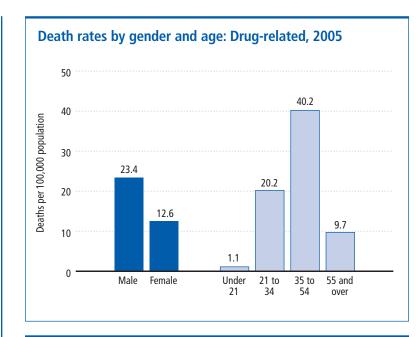
Shaded areas did not participate in DAWN this year.

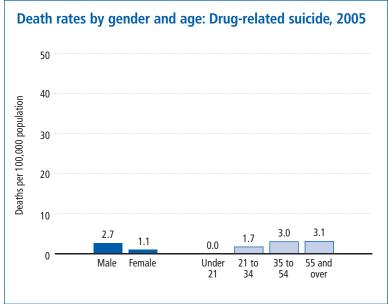






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Deaths
29
99
7
29
0

Drug-related suicide	Deaths
Health care facility	0
Home	14
Public place	
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	148	164	29	30	17	0	
Alcohol*	39	40	0	8	5		
Cocaine	80	75	22				
Marijuana		11	0	0			
Stimulants	0	0	0	0	0		
Club drugs†	0	0	0	0	0		
Hallucinogens††	0	0	0	0	0		
Inhalants	0	0	0	0	0	······································	
Antidepressants	37	50	0	18	11		
Antipsychotics	11	9	0	11			
Benzodiazepines	55	53	0	16	10		
Misc. anxiolytics, sedatives, and hypnotics	23	29	0	4	9	···•	
Opiates/opioids	91	105	4	12	7	••••	
Heroin (specified)	12	20	0	0	0	•••••	
Methadone	39	23					
All other opiates/opioids	69	85		12	7	···•	
Nonsteroidal anti-inflammatory agents	0		0			•	
Salicylates/combinations						•	
Misc. analgesics/combinations	12	11		8			
Anticonvulsants	11	21			4	····	
Muscle relaxants	9	8	0	4	4	···	

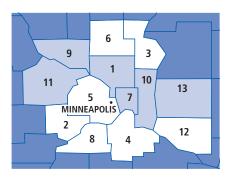
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Minneapolis-St. Paul-Bloomington, MN-WI



Drug-related 11

Drug-related suicide 20

Metro area population, 2005 3,141,050

Population covered by DAWN 1,832,939

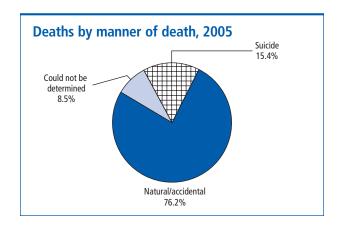
Percent of population covered by DAWN

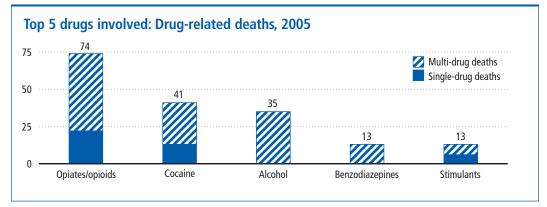
58%

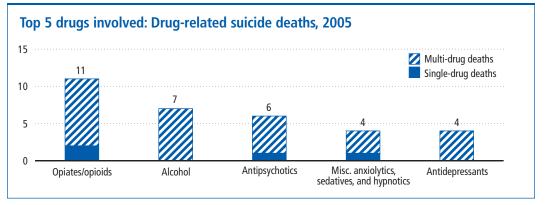
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relate	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (7)	110	6.0	20	1.1	1,832,939
1. Anoka County, MN					323,403
2. Carver County, MN	0	0.0	0	0.0	84,930
3. Chisago County, MN	4	8.1	0	0.0	49,349
4. Dakota County, MN	12	3.1	4	1.0	383,368
5. Hennepin County, MN	88	7.9	16	1.4	1,118,746
6. Isanti County, MN	0	0.0	0	0.0	37,582
7. Ramsey County, MN					494,883
8. Scott County, MN	4	3.3	0	0.0	120,008
9. Sherburne County, MN					81,830
10. Washington County, MN					220,167
11. Wright County, MN					110,562
12. Pierce County, WI	2	5.1	0	0.0	38,956
13. St. Croix County, WI					77,266

Shaded areas did not participate in DAWN this year.

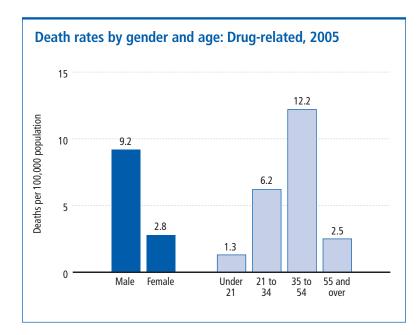


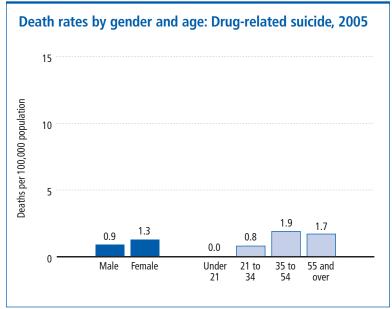




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	16
Home	68
Public place	4
Other	22
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	17
Public place	0
Other	0
Not documented	0

Drug category		Drug-relate	k	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	84	110	46	25	20	5	
Alcohol*	26	35	0	5	7	0	
Cocaine	28	41	13			0	
Marijuana	0		0		0	0	
Stimulants	8	13	6	0			
Club drugs†			0	0	0	0	
Hallucinogens††		0	0	0	0	0	
Inhalants	0	0	0	0	0	0	
Antidepressants		5		5	4	0	
Antipsychotics	0		0	4	6		
Benzodiazepines	10	13	0	4		0	
Misc. anxiolytics, sedatives, and hypnotics	0		0	4	4		
Opiates/opioids	58	74	22	9	11		
Heroin (specified)	9	5	0	0	0	0	
Methadone	15	15		0		0	
All other opiates/opioids	37	63	19	9	10		
Nonsteroidal anti-inflammatory agents	0			0	0	0	
Salicylates/combinations		0	0	0	0	0	
Misc. analgesics/combinations	4	0	0	10		0	
Anticonvulsants	0	0	0	0	0	0	
Muscle relaxants	0		0	0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

New York-Northern New Jersey-Long Island, NY-NJ-PA



Deaths reported to DAWN

Drug-related 963

Drug-related suicide 78

Metro area population, 2005 18,813,723

Population covered by DAWN 11,101,883

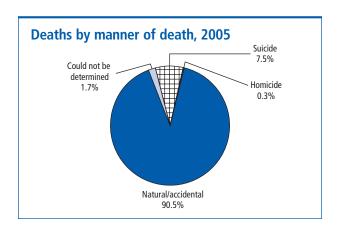
Percent of population covered by DAWN

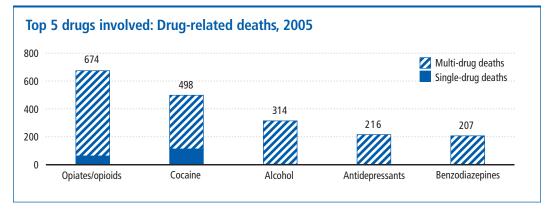
59%

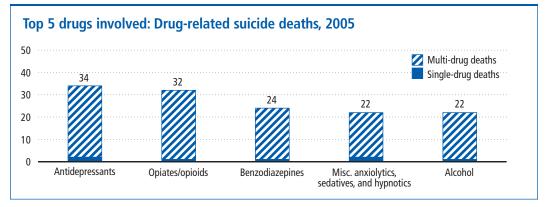
Metro area overview: Deaths and population by county, 2005

Matus avec some one	Drug-related Drug-related suic			ed suicide	Damulatian
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (10)	963	8.7	78	0.7	11,101,883
1. Bergen County, NJ					902,308
2. Essex County, NJ					789,166
3. Hudson County, NJ					602,970
4. Hunterdon County, NJ					130,042
5. Middlesex County, NJ					789,283
6. Monmouth County, NJ					634,841
7. Morris County, NJ	30	6.1	9	1.8	490,084
8. Ocean County, NJ					558,170
9. Passaic County, NJ					496,985
10. Somerset County, NJ					319,830
11. Sussex County, NJ					152,726
12. Union County, NJ	45	8.5	5	0.9	530,710
13. Bronx County, NY	208	15.2	4	0.3	1,364,566
14. Kings County, NY	188	7.5	5	0.2	2,511,408
15. Nassau County, NY					1,331,620
16. New York County, NY	202	12.6	25	1.6	1,606,275
17. Putnam County, NY	7	7.0	0	0.0	100,528
18. Queens County, NY	112	5.0	7	0.3	2,256,576
19. Richmond County, NY	19	4.0	1	0.2	475,014
20. Rockland County, NY	11	3.7	1	0.3	294,636
21. Suffolk County, NY	141	9.6	21	1.4	1,472,086
22. Westchester County, NY					947,719
23. Pike County, PA					56,180

Shaded areas did not participate in DAWN this year.

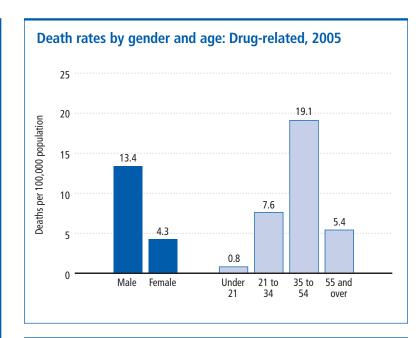


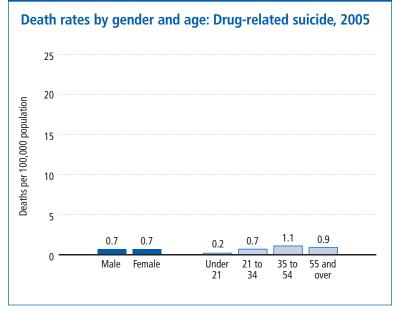




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	273
Home	553
Public place	32
Other	82
Not documented	23

Drug-related suicide	Deaths
Health care facility	18
Home	45
Public place	5
Other	9
Not documented	

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	1,055	963	187	85	78	13	
Alcohol*	309	314		13	22		
Cocaine	554	498	112	11	9		
Marijuana	37	26	0			0	
Stimulants		7	0	0	0	0	
Club drugs†	5	6		0		0	
Hallucinogens††	14	5	0		0	0	
Inhalants	18	25	0			0	
Antidepressants	177	216	0	33	34		
Antipsychotics	53	81		14	14		
Benzodiazepines	204	207		18	24		
Misc. anxiolytics, sedatives, and hypnotics	109	156		21	22		
Opiates/opioids	709	674	62	38	32		
Heroin (specified)	91	91	24		0	0	
Methadone	244	269	23	9	4	0	
All other opiates/opioids	490	456	15	31	30		
Nonsteroidal anti-inflammatory agents	5	5	0	0		0	
Salicylates/combinations		8					
Misc. analgesics/combinations	65	82		21	20		
Anticonvulsants	17	21		9		0	
Muscle relaxants	20	29	0	5	7	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

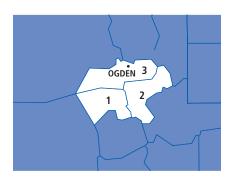
[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Ogden-Clearfield, UT



Drug-related DAWN

Drug-related suicide 8

Metro area population, 2005 486,428

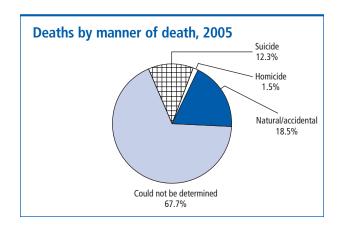
Population covered by DAWN 486.428

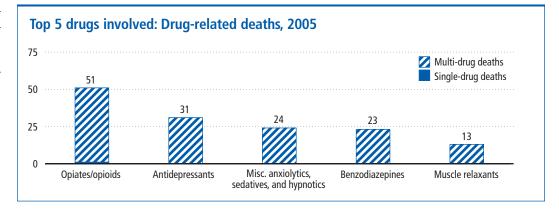
Percent of population covered by DAWN

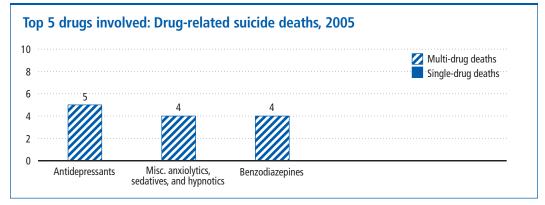
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relate	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (3)	57	11.7	8	1.6	486,428
1. Davis County, UT	27	10.1	1	0.4	268,084
2. Morgan County, UT	0	0.0	0	0.0	7,862
3. Weber County, UT	30	14.3	7	3.3	210,482

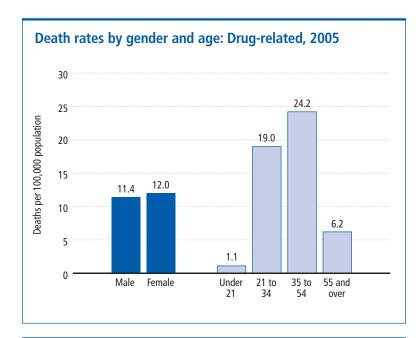


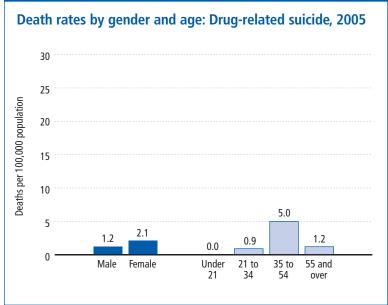




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	17
Home	36
Public place	
Other	
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	7
Public place	0
Other	0
Not documented	0

	Drug-related			Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	57	57		13	8	0	
Alcohol*	6	6		4			
Cocaine	15	8			0		
Marijuana	9				0		
Stimulants	10	11		0	0		
Club drugs†	0	0		0	0		
Hallucinogens††		0		0	0		
Inhalants	0			0	0		
Antidepressants	26	31		7	5	····	
Antipsychotics		8					
Benzodiazepines	21	23		5	4		
Misc. anxiolytics, sedatives, and hypnotics	11	24		5	4		
Opiates/opioids	47	51		9		•••••	
Heroin (specified)				0	0	•••••	
Methadone	23	18					
All other opiates/opioids	32	38		6		•••••	
Nonsteroidal anti-inflammatory agents	0	0		0		•••••	
Salicylates/combinations		0			0	•	
Misc. analgesics/combinations	13	5				•	
Anticonvulsants		8				•••••	
Muscle relaxants	6	13		5		•••••	

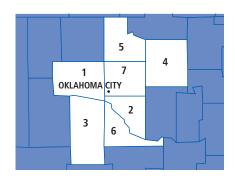
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Oklahoma City, OK



Drug-related 7

Drug-related suicide 13

Metro area population, 2005 1,154,991

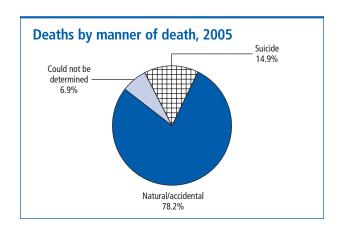
Population covered by DAWN 1,154,991

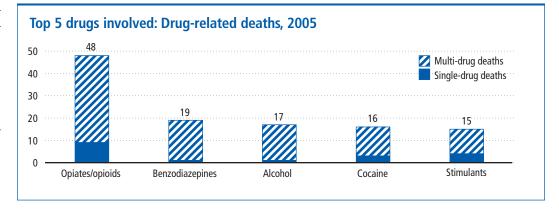
Percent of population covered by DAWN

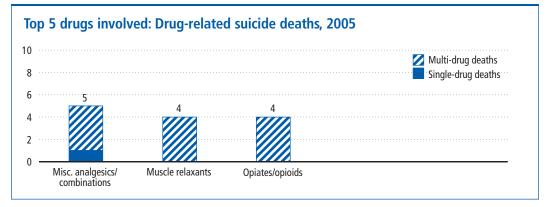
100%

Metro area overview: Deaths and population by county, 2005

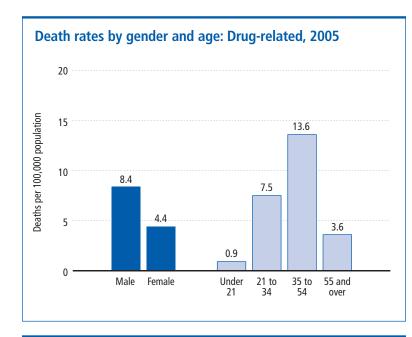
Matra area component	Drug-related		Drug-relate	Population	
Metro area component	Deaths	Deaths Rate I		Deaths Rate	
Total participating (7)	74	6.4	13	1.1	1,154,991
1. Canadian County, OK	4	4.1	0	0.0	98,451
2. Cleveland County, OK	10	4.5	3	1.3	224,244
3. Grady County, OK	1	2.0	0	0.0	49,364
4. Lincoln County, OK	1	3.1	2	6.2	32,344
5. Logan County, OK	2	5.5	0	0.0	36,414
6. Mcclain County, OK	3	10.0	0	0.0	29,982
7. Oklahoma County, OK	53	7.7	8	1.2	684,192

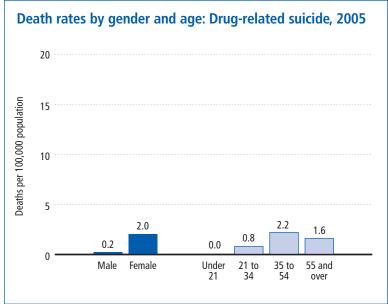






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	8
Home	54
Public place	8
Other	
Not documented	

Drug-related suicide	Deaths
Health care facility	4
Home	9
Public place	0
Other	0
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS		74	22		13		
Alcohol*		17					
Cocaine		16					
Marijuana		0	0		0		
Stimulants		15	4				
Club drugs†		0	0		0		
Hallucinogens††		0	0		0		
Inhalants		4	4		0		
Antidepressants		7	0				
Antipsychotics			0		0		
Benzodiazepines		19					
Misc. anxiolytics, sedatives, and hypnotics		4	0		0		
Opiates/opioids		48	9		4		
Heroin (specified)	•		0		0		
Methadone		13			0		
All other opiates/opioids		35	6		4		
Nonsteroidal anti-inflammatory agents			0		0		
Salicylates/combinations		0	0		0		
Misc. analgesics/combinations		7	0		5		
Anticonvulsants			0				
Muscle relaxants		7	0		4		

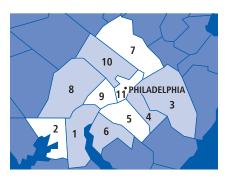
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Philadelphia-Camden-Wilmington, PA-NJ-DE-MD



Drug-related 650
Drug-related suicide 47

Metro area population, 2005 5,806,092

Population covered by DAWN 3,005,026

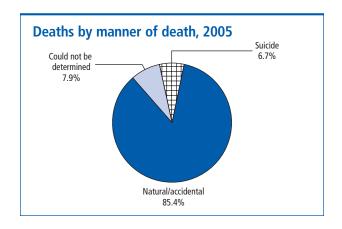
Percent of population covered by DAWN

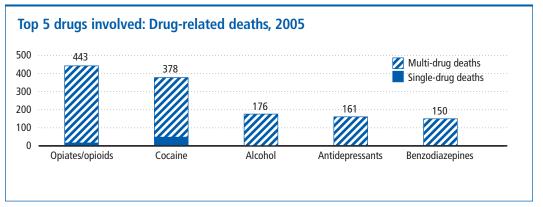
52%

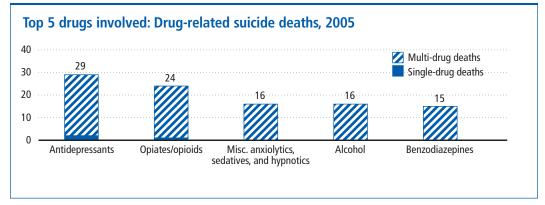
Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-r	elated	Drug-relat	ed suicide	Population
wetro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (5)	650	21.6	47	1.6	3,005,026
1. New Castle County, DE					522,094
2. Cecil County, MD	15	15.4	1	1.0	97,474
3. Burlington County, NJ					449,148
4. Camden County, NJ					515,381
5. Gloucester County, NJ	24	8.7	5	1.8	277,037
6. Salem County, NJ					66,054
7. Bucks County, PA	59	9.5	13	2.1	619,772
8. Chester County, PA					473,723
9. Delaware County, PA	90	16.2	6	1.1	554,393
10. Montgomery County, PA					774,666
11. Philadelphia County, PA	462	31.7	22	1.5	1,456,350

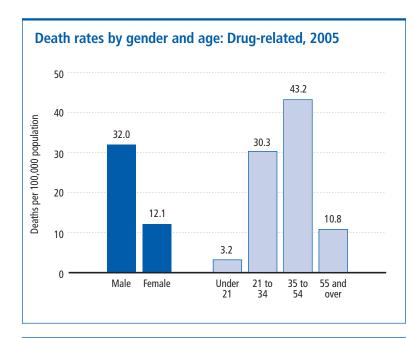
Shaded areas did not participate in DAWN this year.

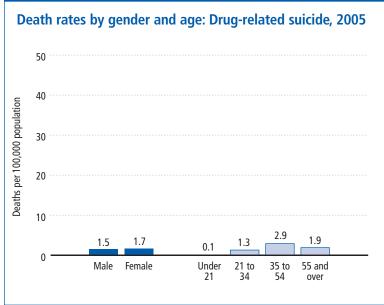






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	194
Home	336
Public place	41
Other	76
Not documented	

Drug-related suicide	Deaths
Health care facility	11
Home	33
Public place	0
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS		650	77		47	4	
Alcohol*		176	0		16	0	
Cocaine		378	48			0	
Marijuana		11	0		0	0	
Stimulants		17	0		0	0	
Club drugs†		6			0	0	
Hallucinogens††		17			0	0	
Inhalants			0			0	
Antidepressants		161			29		
Antipsychotics		56	0		6	0	
Benzodiazepines		150			15	0	
Misc. anxiolytics, sedatives, and hypnotics		89	0		16	0	
Opiates/opioids		443	16		24		
Heroin (specified)		132	6			0	
Methadone		124			5	0	
All other opiates/opioids		350	7		22		
Nonsteroidal anti-inflammatory agents		82	0			0	
Salicylates/combinations			0			0	
Misc. analgesics/combinations		21	0		5		
Anticonvulsants		51			4	0	
Muscle relaxants		37			4	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Phoenix-Mesa-Scottsdale, AZ



Drug-related 506
Drug-related suicide 89

Metro area population, 2005 3,878,525

Population covered by DAWN 3,638,481

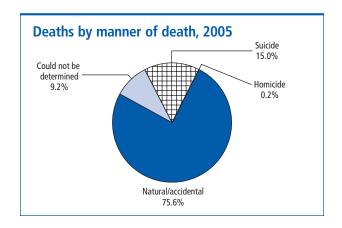
Percent of population covered by DAWN

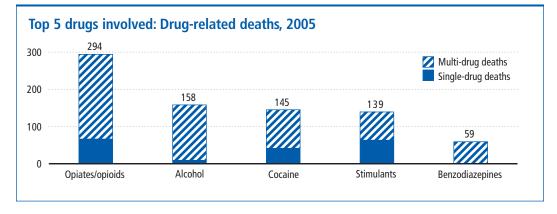
94%

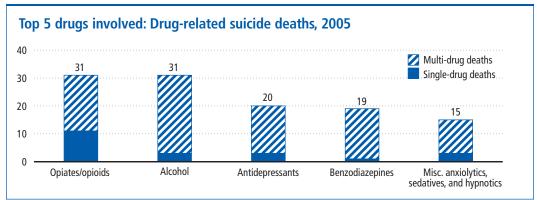
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relate	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	506	13.9	89	2.4	3,638,481
1. Maricopa County, AZ	506	13.9	89	2.4	3,638,481
2. Pinal County, AZ					240,044

Shaded areas did not participate in DAWN this year.

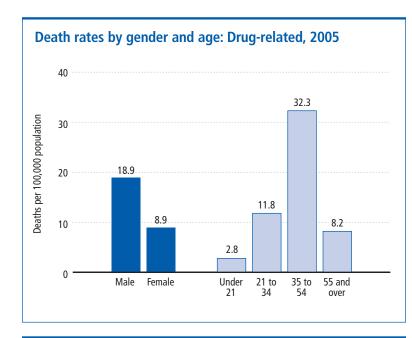


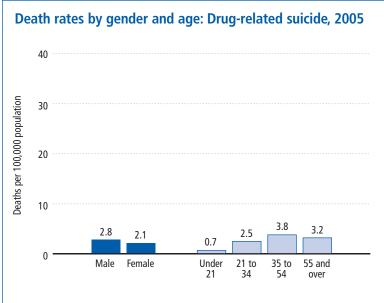




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Deaths
182
221
40
63
0

Drug-related suicide	Deaths
Health care facility	20
Home	58
Public place	
Other	10
Not documented	0

Drug category		Drug-relate	k	Dru	ıg-related su	icide
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005
ALL DRUGS	396	506	197	67	89	39
Alcohol*	100	158	9	10	31	
Cocaine	130	145	41		10	
Marijuana	7	4	0	0	0	0
Stimulants	86	139	63	4	14	10
Club drugs†	0		0	0	0	0
Hallucinogens††				0	0	0
Inhalants				0		0
Antidepressants	39	58	7	25	20	
Antipsychotics	5	25			8	
Benzodiazepines	53	59	0	15	19	
Misc. anxiolytics, sedatives, and hypnotics	17	32		14	15	
Opiates/opioids	265	294	66	32	31	11
Heroin (specified)	65	39	11			0
Methadone	64	96	17	5	6	
All other opiates/opioids	168	208	38	26	26	8
Nonsteroidal anti-inflammatory agents	0	0	0	0		0
Salicylates/combinations	0		0		0	0
Misc. analgesics/combinations	16	13		10	5	
Anticonvulsants			0			0
Muscle relaxants	12	18			5	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

Pittsburgh, PA



Drug-related to DAWN

Drug-related 219

Drug-related suicide 21

Metro area population, 2005 2,381,671

Population covered by DAWN 1,233,036

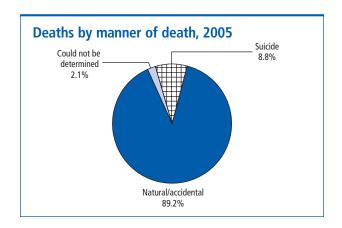
Percent of population covered by DAWN

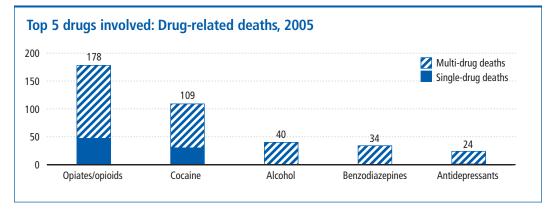
52%

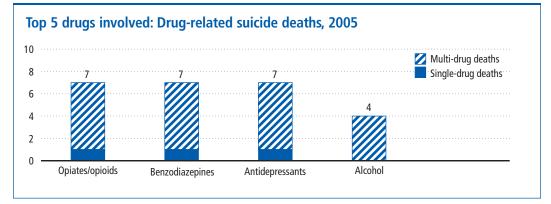
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	ed suicide	Donulation
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	219	17.8	21	1.7	1,233,036
1. Allegheny County, PA	219	17.8	21	1.7	1,233,036
2. Armstrong County, PA					70,527
3. Beaver County, PA					176,825
4. Butler County, PA					181,526
5. Fayette County, PA					146,206
6. Washington County, PA					206,418
7. Westmoreland County, PA					367,133

Shaded areas did not participate in DAWN this year.

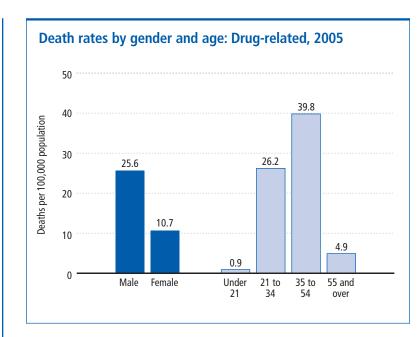


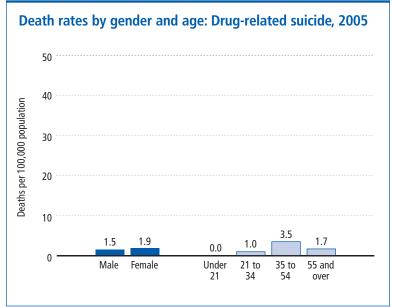




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	59
Home	124
Public place	8
Other	28
Not documented	0

Drug-related suicide	Deaths
Health care facility	7
Home	12
Public place	
Other	0
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	211	219	81	27	21	8	
Alcohol*	32	40	0	7	4	0	
Cocaine	92	109	30			0	
Marijuana	0	0	0	0	0	0	
Stimulants		0	0	0		0	
Club drugs†	0	0	0	0	0	0	
Hallucinogens††		0	0	0	0	0	
Inhalants			0				
Antidepressants	24	24		9	7		
Antipsychotics	6	5	0				
Benzodiazepines	37	34	0	4	7		
Misc. anxiolytics, sedatives, and hypnotics	9	7	0			0	
Opiates/opioids	164	178	47	9	7		
Heroin (specified)	79	79	25	0	0	0	
Methadone	30	36	5		0	0	
All other opiates/opioids	69	78	17	7	7		
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations	0						
Misc. analgesics/combinations	5	5	0	9			
Anticonvulsants			0			0	
Muscle relaxants			0	0	0	0	

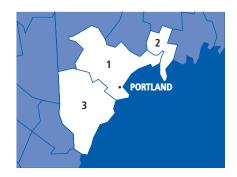
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Portland-South Portland-Biddeford, ME



Deaths reported to DAWN

Drug-related 54

Drug-related suicide 15

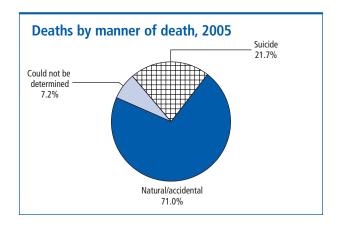
Metro area population, 2005 512,992

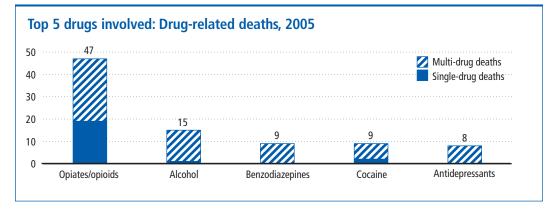
Population covered by DAWN 512.992

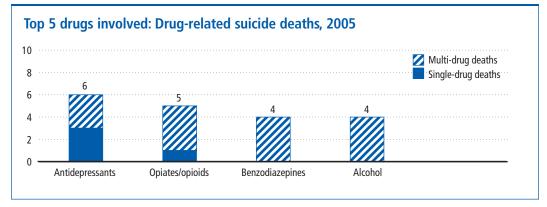
Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2005

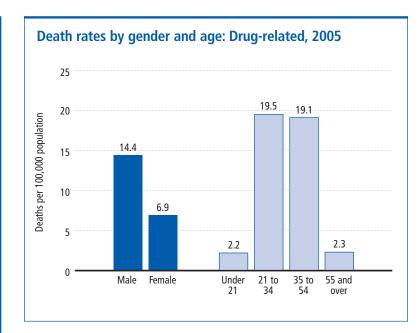
Motro area component	Drug-r	elated	Drug-relat	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (3)	54	10.5	15	2.9	512,992
1. Cumberland County, ME	35	12.8	10	3.6	274,194
2. Sagadahoc County, ME	1	2.7	0	0.0	36,734
3. York County, ME	18	8.9	5	2.5	202,064

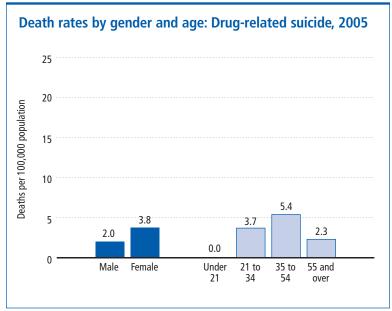






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	16
Home	28
Public place	4
Other	6
Not documented	0

Drug-related suicide	Deaths
Health care facility	4
Home	10
Public place	
Other	0
Not documented	0

Drug category		Drug-relate	b	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	50	54	23	7	15	6	
Alcohol*	13	15			4	0	
Cocaine	14	9			0	0	
Marijuana	0	0	0	0	0	0	
Stimulants	0	0	0	0	0	0	
Club drugs†			0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants	0	0	0	0	0	0	
Antidepressants	10	8	0		6		
Antipsychotics						0	
Benzodiazepines	11	9	0		4	0	
Misc. anxiolytics, sedatives, and hypnotics			0			0	
Opiates/opioids	42	47	19		5		
Heroin (specified)		5		0			
Methadone	31	20	11	0		0	
All other opiates/opioids	12	28	7			0	
Nonsteroidal anti-inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations	0	0	0	0	0	0	
Misc. analgesics/combinations			0	0		0	
Anticonvulsants			0				
Muscle relaxants	0		0	0	0	0	

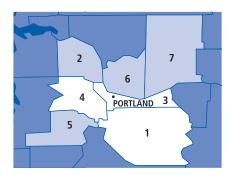
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Portland-Vancouver-Beaverton, OR-WA



Drug-related to DAWN

Drug-related 176

Drug-related suicide 33

Metro area population, 2005 2,096,571

Population covered by DAWN 1,541,920

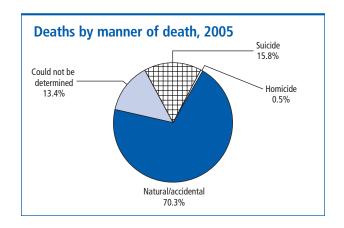
Percent of population covered by DAWN

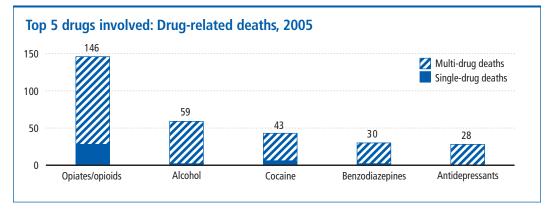
74%

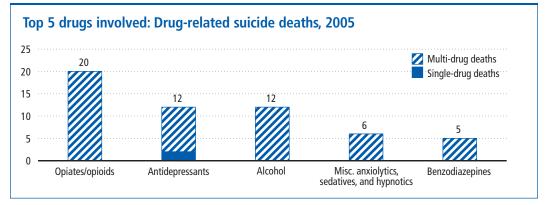
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relat	ed suicide	Donulation
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (3)	176	11.4	33	2.1	1,541,920
1. Clackamas County, OR	29	7.9	2	0.5	368,259
2. Columbia County, OR					47,899
3. Multnomah County, OR	121	18.0	23	3.4	672,947
4. Washington County, OR	26	5.2	8	1.6	500,714
5. Yamhill County, OR					92,080
6. Clark County, WA					404,066
7. Skamania County, WA					10,606

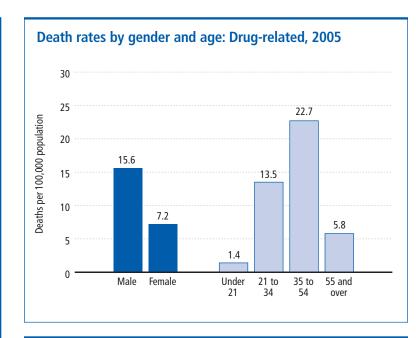
Shaded areas did not participate in DAWN this year.

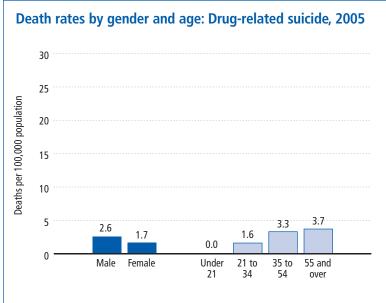






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	29
Home	105
Public place	20
Other	22
Not documented	0

Drug-related suicide	Deaths
Health care facility	4
Home	23
Public place	
Other	4
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	154	176	46	30	33	6	
Alcohol*	57	59		10	12	0	
Cocaine	57	43	6	0	4	0	
Marijuana	15	11	0			0	
Stimulants	24	23	6	4		0	
Club drugs†		0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants		0	0	0			
Antidepressants	38	28	0	16	12		
Antipsychotics		5	0	8		0	
Benzodiazepines	32	30		4	5	0	
Misc. anxiolytics, sedatives, and hypnotics	15	16	0		6	0	
Opiates/opioids	128	146	28	10	20	0	
Heroin (specified)	65	50	13	0	4	0	
Methadone	36	50	12	4	4	0	
All other opiates/opioids	96	70		6	17	0	
Nonsteroidal anti-inflammatory agents	0		0	0		0	
Salicylates/combinations		0	0		0	0	
Misc. analgesics/combinations	5	4					
Anticonvulsants		4	0			0	
Muscle relaxants	4	6	0			0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Provo-Orem, UT



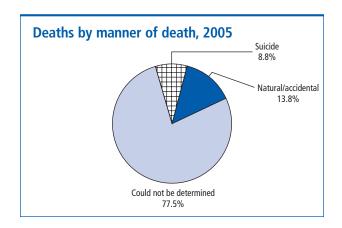
Deaths reported to DAWN
Drug-related 73
Drug-related suicide 7
Metro area population, 2005
461,020

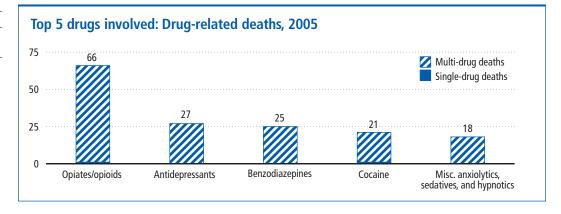
Population covered by DAWN 461,020

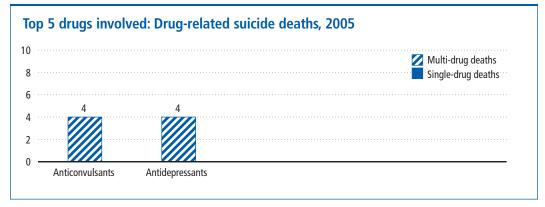
Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2005

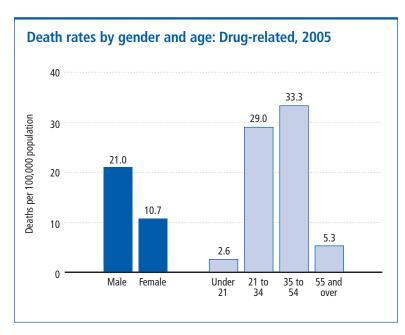
Metro area component	Drug-r	Drug-related		Drug-related suicide		
wetro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (2)	73	15.8	7	1.5	461,020	
1. Juab County, UT	2	21.8	1	10.9	9,165	
2. Utah County, UT	71	15.7	6	1.3	451,855	

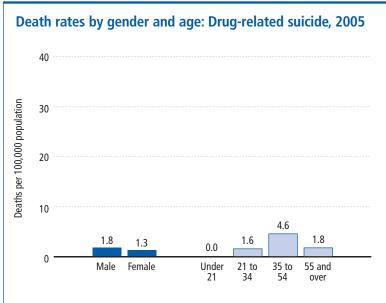






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	31
Home	38
Public place	0
Other	4
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	
Public place	
Other	0
Not documented	0

	Drug-related			Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	53	73			7	0	
Alcohol*	12	5					
Cocaine	18	21			0		
Marijuana	8	12					
Stimulants	7	8					
Club drugs†	0	0			0		
Hallucinogens††	0	0			0		
Inhalants	0	0			0		
Antidepressants	21	27			4	•	
Antipsychotics		8			0		
Benzodiazepines	16	25					
Misc. anxiolytics, sedatives, and hypnotics	10	18					
Opiates/opioids	49	66					
Heroin (specified)	10					•••••	
Methadone	16	20			0		
All other opiates/opioids	38	55				•••••	
Nonsteroidal anti-inflammatory agents	0	0			0		
Salicylates/combinations	0	0			0	••••	
Misc. analgesics/combinations		9					
Anticonvulsants	4	8			4	•••••	
Muscle relaxants	5	10			0	•••••	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Salt Lake City, UT



Drug-related 19

Drug-related suicide 25

Metro area population, 2005 1,046,685

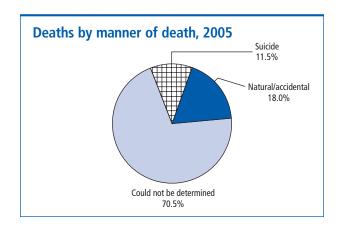
Population covered by DAWN 1,046,685

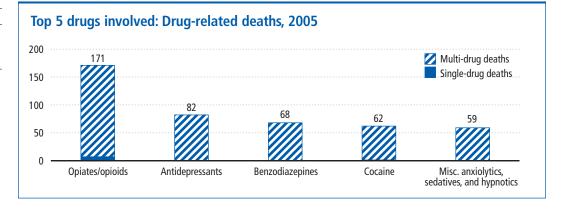
Percent of population covered by DAWN

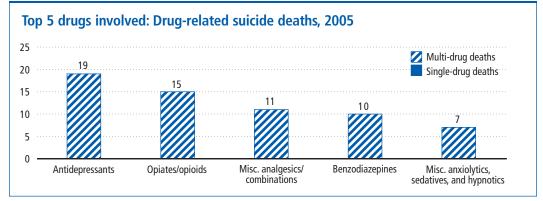
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	Drug-related		Drug-related suicide		
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (3)	192	18.3	25	2.4	1,046,685	
1. Salt Lake County, UT	183	19.1	24	2.5	960,297	
2. Summit County, UT	4	11.4	0	0.0	35,119	
3. Tooele County, UT	5	9.8	1	2.0	51,269	

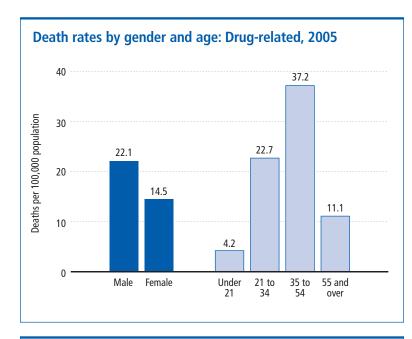


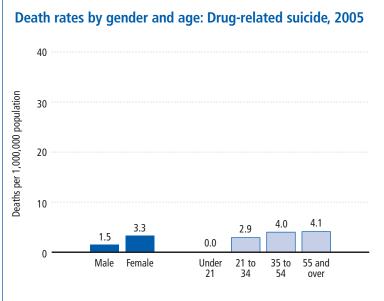




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	47
Home	127
Public place	7
Other	11
Not documented	0

Drug-related suicide	Deaths
Health care facility	5
Home	16
Public place	
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005	
ALL DRUGS	172	192	8	31	25	0	
Alcohol*	47	36	0	4	5		
Cocaine	57	62					
Marijuana	15	30	0				
Stimulants	41	27	0				
Club drugs†			0	0	0		
Hallucinogens††	0	0	0	0	0		
Inhalants			0	0	0	······································	
Antidepressants	65	82	0	20	19		
Antipsychotics	5	17	0	7	5		
Benzodiazepines	49	68	0	6	10		
Misc. anxiolytics, sedatives, and hypnotics	47	59	0	14	7		
Opiates/opioids	147	171	7	15	15	••••	
Heroin (specified)	17	14	0	0	0		
Methadone	52	55		5			
All other opiates/opioids	109	140	5	13	13	···•	
Nonsteroidal anti-inflammatory agents			0			•••••	
Salicylates/combinations	0	0	0	0		•	
Misc. analgesics/combinations	21	27	0	7	11		
Anticonvulsants	11	19	0			••••••	
Muscle relaxants	13	28	0			•••••	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

San Diego-Carlsbad-San Marcos, CA



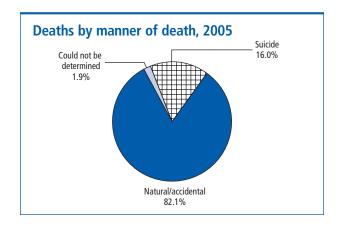
Deaths reported to DAWN
Drug-related 314
Drug-related suicide 60
Metro area population, 2005
2,936,609
Population covered by DAWN
2,936,609

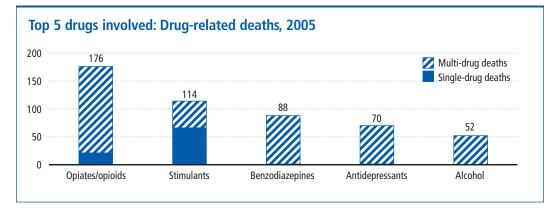
Percent of population covered by DAWN

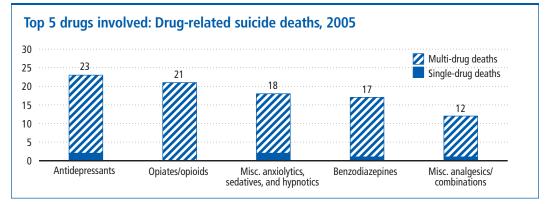
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	314	10.7	60	2.0	2,936,609
1. San Diego County, CA	314	10.7	60	2.0	2,936,609

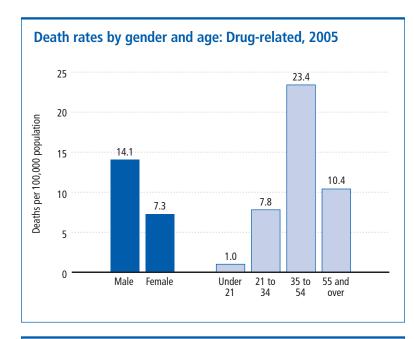


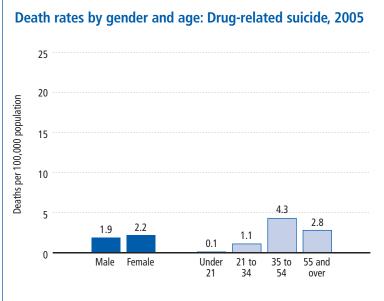




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	81
Home	167
Public place	29
Other	37
Not documented	0

Drug-related suicide	Deaths
Health care facility	5
Home	40
Public place	
Other	12
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	283	314	102	62	60	12	
Alcohol*	68	52	0	23	12	0	
Cocaine	51	43	11		4		
Marijuana	6	34	0	0		0	
Stimulants	89	114	66	4	5		
Club drugs†			0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants	0			0		0	
Antidepressants	67	70		28	23		
Antipsychotics	16	18	0	11	8		
Benzodiazepines	69	88		17	17		
Misc. anxiolytics, sedatives, and hypnotics	30	24	0	14	18		
Opiates/opioids	166	176	21	22	21	0	
Heroin (specified)	48	35	5		0	0	
Methadone	26	33	6		4	0	
All other opiates/opioids	114	139	10	21	17	0	
Nonsteroidal anti-inflammatory agents		4	0			0	
Salicylates/combinations	0	0	0		0	0	
Misc. analgesics/combinations	21	11	0	6	12		
Anticonvulsants	6	10			4		
Muscle relaxants	23	8	0	6	4	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Seattle-Tacoma-Bellevue, WA



Deaths reported to DAWN
Drug-related 364
Drug-related suicide 60
Metro area population, 2005

3,207,892 Population covered by DAWN

2,454,683

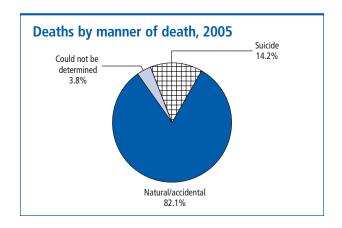
Percent of population covered by DAWN

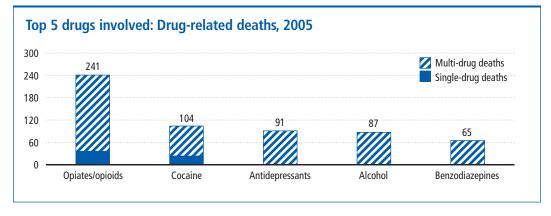
77%

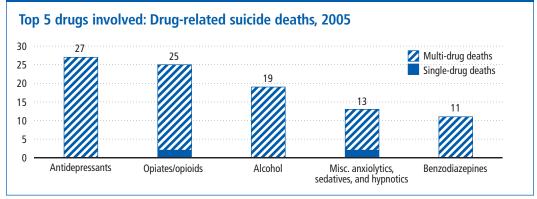
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relat	Population	
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (2)	364	14.8	60	2.4	2,454,683
1. King County, WA	301	16.7	51	2.8	1,799,119
2. Pierce County, WA					753,209
3. Snohomish County, WA	63	9.6	9	1.4	655,564

Shaded areas did not participate in DAWN this year.

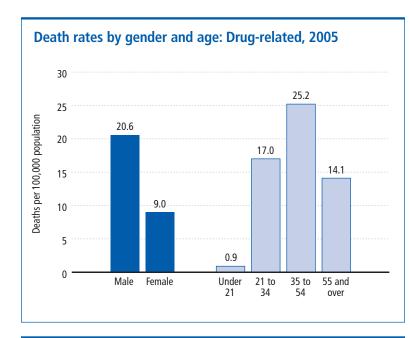


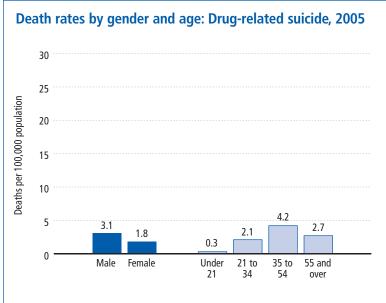




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	103
Home	174
Public place	45
Other	42
Not documented	0

Drug-related suicide	Deaths
Health care facility	6
Home	41
Public place	7
Other	6
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	377	364	115	52	60	15	
Alcohol*	89	87	0	15	19	0	
Cocaine	116	104	23	4	6		
Marijuana	5	8	0			0	
Stimulants	31	36	15		6	5	
Club drugs†		5	0	0	0	0	
Hallucinogens††			0	0	0	0	
Inhalants			0				
Antidepressants	101	91		27	27	0	
Antipsychotics	8	6	0				
Benzodiazepines	60	65	0	9	11	0	
Misc. anxiolytics, sedatives, and hypnotics	43	43	0	16	13		
Opiates/opioids	241	241	36	18	25		
Heroin (specified)	43	66	15				
Methadone	100	114	13		5	0	
All other opiates/opioids	132	108	8	16	19		
Nonsteroidal anti-inflammatory agents						0	
Salicylates/combinations		4		4			
Misc. analgesics/combinations	22	11		9	5	0	
Anticonvulsants	23	21	0	6	8	0	
Muscle relaxants	19	20	0		4	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Springfield, MA



Deaths reported to DAWN

Drug-related 7

Drug-related suicide 16

Metro area population, 2005 686,491

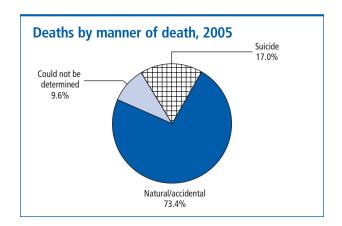
Population covered by DAWN 686,491

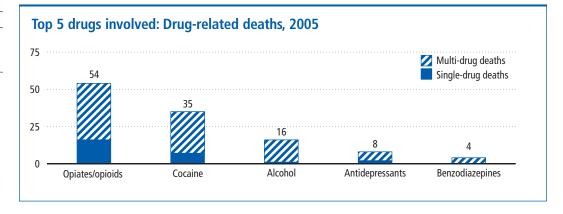
Percent of population covered by DAWN

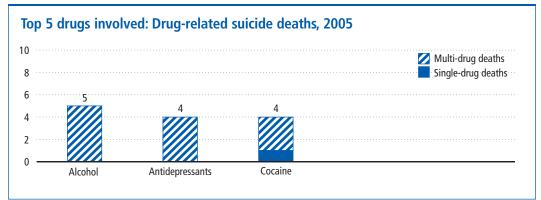
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	Drug-related		Drug-related suicide		
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (3)	78	11.4	16	2.3	686,491	
1. Franklin County, MA	4	5.5	0	0.0	72,310	
2. Hampden County, MA	64	13.9	12	2.6	460,828	
3. Hampshire County, MA	10	6.5	4	2.6	153,353	

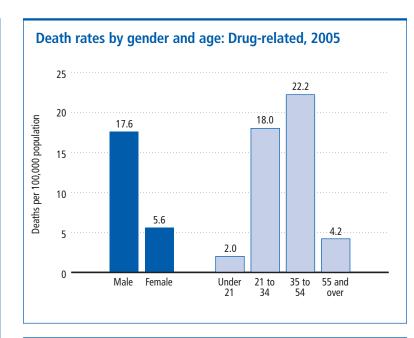


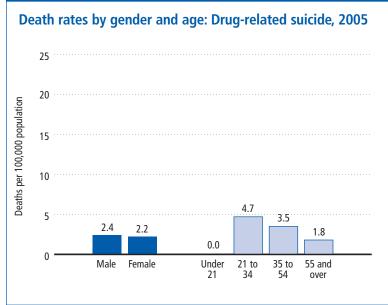




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	33
Home	38
Public place	
Other	4
Not documented	0

Drug-related suicide	Deaths
Health care facility	5
Home	10
Public place	0
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide		
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-dru deaths, 2005
ALL DRUGS		78	32		16	5
Alcohol*		16			5	0
Cocaine		35	7		4	
Marijuana		0	0		0	0
Stimulants		0	0		0	0
Club drugs†		0	0		0	0
Hallucinogens††		0	0		0	0
Inhalants					0	0
Antidepressants		8			4	0
Antipsychotics						0
Benzodiazepines		4	0			0
Misc. anxiolytics, sedatives, and hypnotics			0			0
Opiates/opioids		54	16			
Heroin (specified)		11	6			0
Methadone		8			0	0
All other opiates/opioids		40	8			
Nonsteroidal anti-inflammatory agents		0	0		0	0
Salicylates/combinations						
Misc. analgesics/combinations			0		0	0
Anticonvulsants			0		0	0
Muscle relaxants			0		0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

St. Louis, MO-IL



Drug-related value by Drug-related 239
Drug-related suicide 40

Metro area population, 2005 2,806,221

Population covered by DAWN 2,362,217

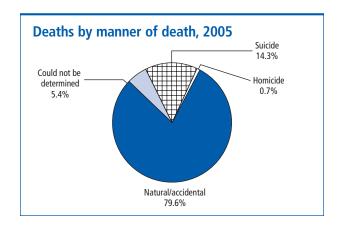
Percent of population covered by DAWN

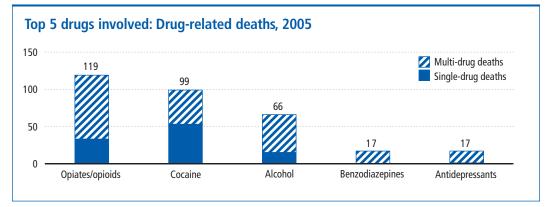
84%

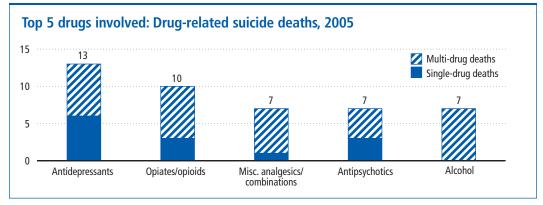
Metro area overview: Deaths and population by county, 2005

Matus ausa samunanant	Drug-r	elated	Drug-relate	ed suicide	Damulatian
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (9)	239	10.1	40	1.7	2,362,217
1. Bond County, IL					18,011
2. Calhoun County, IL					5,166
3. Clinton County, IL	0	0.0	0	0.0	36,138
4. Jersey County, IL	1	4.5	0	0.0	22,423
5. Macoupin County, IL					49,016
6. Madison County, IL					263,975
7. Monroe County, IL					31,289
8. St. Clair County, IL	9	3.5	1	0.4	259,388
9. Crawford County, MO					23,810
10. Franklin County, MO	15	15.2	1	1.0	98,987
11. Jefferson County, MO	19	8.9	4	1.9	213,011
12. Lincoln County, MO	2	4.2	0	0.0	47,834
13. St. Charles County, MO	24	7.3	5	1.5	329,606
14. St. Louis city, MO	81	23.0	8	2.3	352,572
15. St. Louis County, MO	88	8.8	21	2.1	1,002,258
16. Warren County, MO					28,765
17. Washington County, MO					23,972

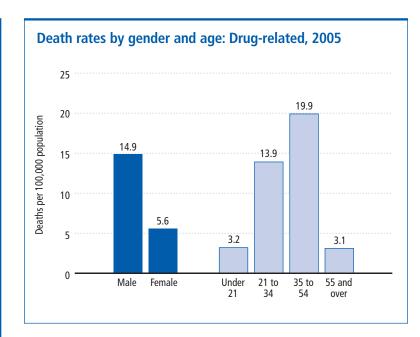
Shaded areas did not participate in DAWN this year.

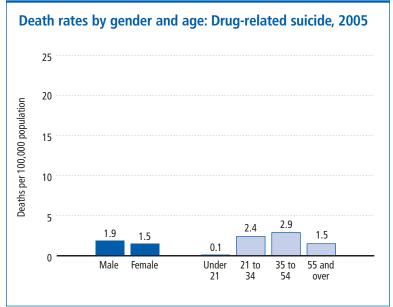






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	90
Home	107
Public place	19
Other	22
Not documented	

Drug-related suicide	Deaths
Health care facility	18
Home	15
Public place	
Other	5
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	211	239	121	47	40	21	
Alcohol*	79	66	15	21	7	0	
Cocaine	77	99	53	7	5		
Marijuana	5		0	0	0	0	
Stimulants	8	9	6	0	0	0	
Club drugs†	0	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants				0	0	0	
Antidepressants	16	17		16	13	6	
Antipsychotics		8	0	4	7		
Benzodiazepines	19	17	0	9	4		
Misc. anxiolytics, sedatives, and hypnotics			0	4			
Opiates/opioids	130	119	33	17	10		
Heroin (specified)	55	35	11	0		0	
Methadone	15	26	9		4		
All other opiates/opioids	89	75	13	16	7		
Nonsteroidal anti-inflammatory agents		0	0	0	0	0	
Salicylates/combinations						0	
Misc. analgesics/combinations	11	10	4	8	7		
Anticonvulsants		0	0			0	
Muscle relaxants		10				0	

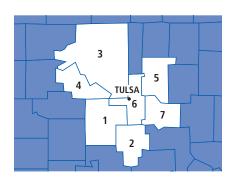
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

Tulsa, OK



Deaths reported to DAWN

Drug-related 93

Drug-related suicide 11

Metro area population, 2005 885,778

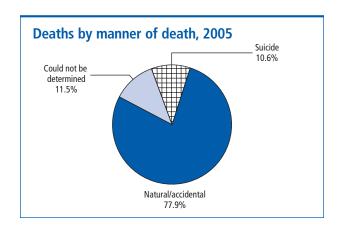
Population covered by DAWN 885.778

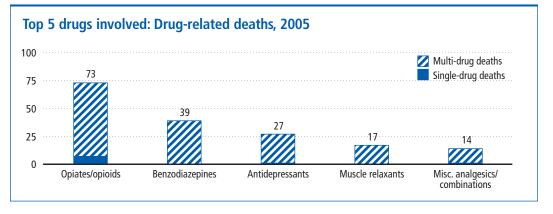
Percent of population covered by DAWN

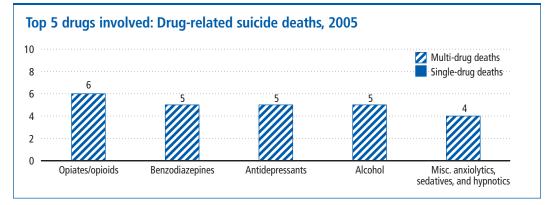
100%

Metro area overview: Deaths and population by county, 2005

Drug-related		Drug-relat	Damulatian		
Deaths	Rate	Deaths Rate		Population	
93	10.5	11	1.2	885,778	
8	11.6	1	1.5	68,674	
2	5.0	1	2.5	39,657	
2	4.4	0	0.0	45,342	
4	23.8	0	0.0	16,792	
6	7.5	0	0.0	80,509	
64	11.2	8	1.4	570,627	
7	10.9	1	1.6	64,177	
	Deaths 93 8 2 2 4 6 6	Deaths Rate 93 10.5 8 11.6 2 5.0 2 4.4 4 23.8 6 7.5 64 11.2	Deaths Rate Deaths 93 10.5 11 8 11.6 1 2 5.0 1 2 4.4 0 4 23.8 0 6 7.5 0 64 11.2 8	Deaths Rate Deaths Rate 93 10.5 11 1.2 8 11.6 1 1.5 2 5.0 1 2.5 2 4.4 0 0.0 4 23.8 0 0.0 6 7.5 0 0.0 64 11.2 8 1.4	

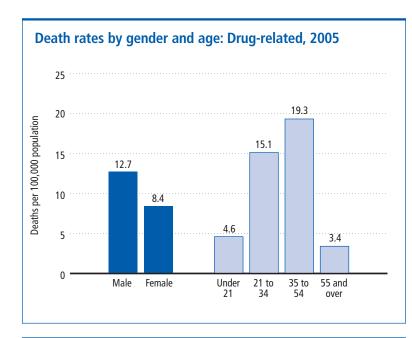


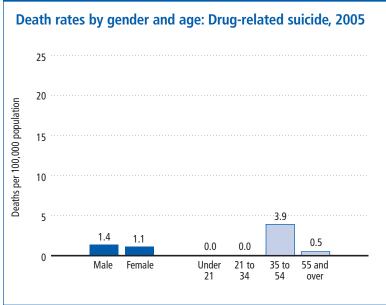




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	19
Home	62
Public place	6
Other	6
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	9
Public place	0
Other	0
Not documented	

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS		93	16		11		
Alcohol*		13			5		
Cocaine		6					
Marijuana		0	0		0		
Stimulants		12					
Club drugs†		0	0		0		
Hallucinogens††		0	0		0		
Inhalants		0	0		0		
Antidepressants		27			5		
Antipsychotics			0		0		
Benzodiazepines		39	0		5		
Misc. anxiolytics, sedatives, and hypnotics		9	0		4		
Opiates/opioids		73	7		6		
Heroin (specified)		0	0		0		
Methadone		36					
All other opiates/opioids		43	5		5		
Nonsteroidal anti-inflammatory agents		0	0		0		
Salicylates/combinations			0		0		
Misc. analgesics/combinations		14					
Anticonvulsants		5	0		0		
Muscle relaxants		17	0				

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Washington-Arlington-Alexandria, DC-VA-MD-WV



Drug-related 283
Drug-related suicide 48

Metro area population, 2005 5,251,629

Population covered by DAWN 5,202,469

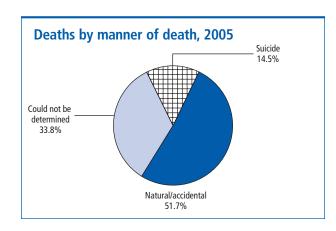
Percent of population covered by DAWN

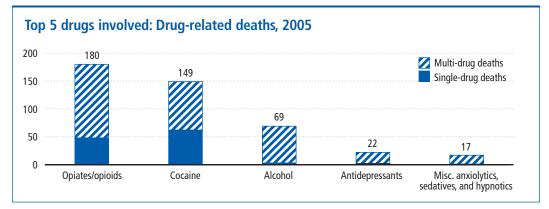
99%

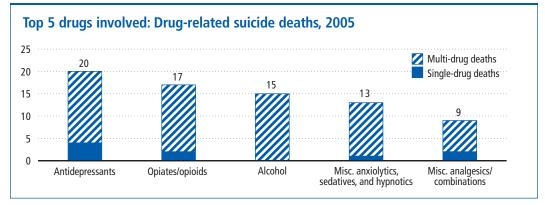
Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relate	Population	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (19)	283	5.4	48	0.9	5,202,469
1. District of Columbia	125	21.5	10	1.7	582,049
2. Calvert County, MD	6	6.8	0	0.0	87,622
3. Charles County, MD	5	3.6	1	0.7	138,106
4. Frederick County, MD	14	6.4	3	1.4	220,409
5. Montgomery County, MD	40	4.3	8	0.9	927,405
6. Prince George's County, MD	49	5.8	4	0.5	842,764
7. Alexandria city, VA	3	2.2	0	0.0	137,602
8. Arlington County, VA	2	1.0	3	1.5	199,761
9. Clarke County, VA	1	7.1	0	0.0	14,154
10. Fairfax County, VA	22	2.1	8	8.0	1,031,837
11. Falls Church city, VA	0	0.0	0	0.0	10,764
12. Fauquier County, VA	2	3.1	2	3.1	64,834
13. Fredericksburg city, VA	1	4.8	1	4.8	20,672
14. Loudoun County, VA	2	8.0	0	0.0	256,417
15. Manassas city, VA	2	5.3	0	0.0	37,499
16. Prince William County, VA	7	1.9	5	1.4	360,887
17. Spotsylvania County, VA	0	0.0	1	0.9	116,312
18. Stafford County, VA	1	8.0	2	1.7	117,968
19. Warren County, VA	1	2.8	0	0.0	35,407
20. Jefferson County, WV					49,160

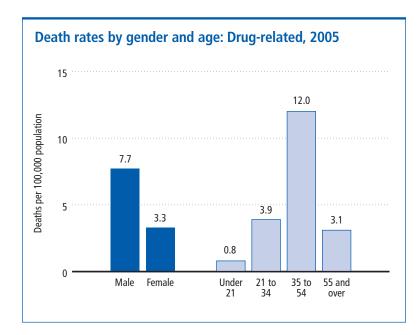
Shaded areas did not participate in DAWN this year.

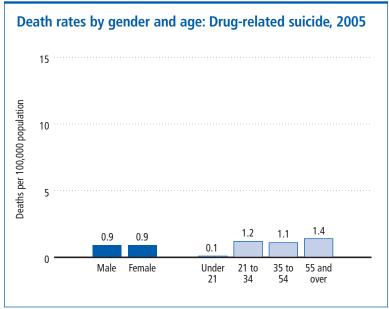






- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	117
Home	108
Public place	16
Other	40
Not documented	

Drug-related suicide	Deaths
Health care facility	13
Home	29
Public place	
Other	
Not documented	0

Drug category	Drug-related			Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS	265	283	123	40	48	17	
Alcohol*	74	69		6	15	0	
Cocaine	125	149	62	4		0	
Marijuana			0	0	0	0	
Stimulants				0	0	0	
Club drugs†		0	0	0	0	0	
Hallucinogens††	5	4	0			0	
Inhalants		0	0			0	
Antidepressants	35	22		17	20	4	
Antipsychotics	9				5	0	
Benzodiazepines	18	17		5	6	0	
Misc. anxiolytics, sedatives, and hypnotics	15	17		14	13		
Opiates/opioids	179	180	48	16	17		
Heroin (specified)	24	17		0	0	0	
Methadone	36	51	14	6		0	
All other opiates/opioids	140	134	32	12	17		
Nonsteroidal anti-inflammatory agents	0	0	0	0		0	
Salicylates/combinations	0	0	0				
Misc. analgesics/combinations	13	13		7	9		
Anticonvulsants			0		4		
Muscle relaxants	5	5	0				

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

tt Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Worcester, MA



Deaths reported to DAWN

Drug-related 90

Drug-related suicide 11

Metro area population, 2005

781,704

Population covered by DAWN

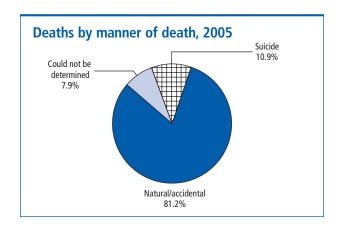
Population covered by DAWN 781,704

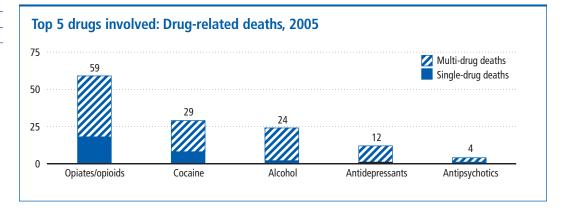
Percent of population covered by DAWN

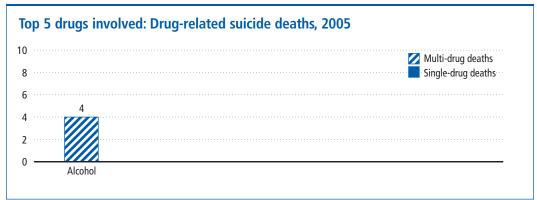
100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (1)	90	11.5	11	1.4	781,704
1. Worcester County, MA	90	11.5	11	1.4	781,704

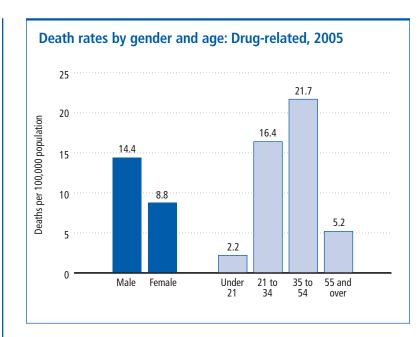


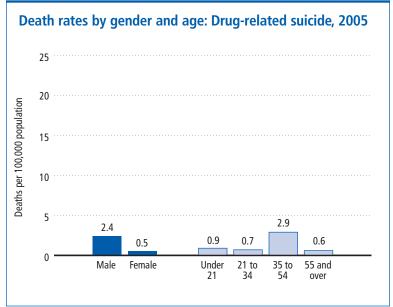




NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.





Drug-related	Deaths
Health care facility	46
Home	33
Public place	
Other	9
Not documented	0

Drug-related suicide	Deaths
Health care facility	
Home	7
Public place	0
Other	
Not documented	0

Drug category		Drug-relate	t t	Drug-related suicide			
	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single-drug deaths, 2005	
ALL DRUGS		90	40		11		
Alcohol*		24			4		
Cocaine		29	8				
Marijuana		4			0		
Stimulants		0	0		0		
Club drugs†		0	0		0		
Hallucinogens††		0	0		0		
Inhalants			0				
Antidepressants		12					
Antipsychotics		4					
Benzodiazepines							
Misc. anxiolytics, sedatives, and hypnotics		0	0				
Opiates/opioids		59	18				
Heroin (specified)		15	7		0		
Methadone		12					
All other opiates/opioids		34	8				
Nonsteroidal anti-inflammatory agents		0	0		0		
Salicylates/combinations		0	0		0		
Misc. analgesics/combinations					0		
Anticonvulsants			0		0		
Muscle relaxants		0	0		0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{3. --} A number less than 4 has been suppressed.

ABBREVIATED PROFILES FOR AREAS WITH FEW DRUG-RELATED DEATHS

Bangor, ME



Deaths reported to DAWN

Drug-related 20 Drug-related suicide 5

Metro area population, 2005 146,817

Population covered by DAWN 146,817

Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	Drug-related		Drug-related suicide		
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (1)	20	13.6	5	3.4	146,817	
1. Penobscot County, ME	20	13.6	5	3.4	146,817	

Fargo, ND-MN



Deaths reported to DAWN

Drug-related 0
Drug-related suicide 0

Metro area population, 2005 184,171

Population covered by DAWN 130,455

Percent of population covered by DAWN

71%

Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-related		Drug-related suicide		Population	
	Deaths	Rate	Deaths	Rate	ropulation	
Total participating (1)	0	0.0	0	0.0	130,455	
1. Clay County, MN					53,716	
2. Cass County, ND	0	0.0	0	0.0	130,455	

Shaded areas did not participate in DAWN this year.

Farmington, NM



Deaths reported to DAWN

Drug-related 9
Drug-related suicide 2

Metro area population, 2005 125,820

Population covered by DAWN 125,820

Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Population	
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	9	7.2	2	1.6	125,820
1. San Juan County, NM	9	7.2	2	1.6	125,820

Las Cruces, NM



Deaths reported to DAWN

Drug-related 15
Drug-related suicide 5

Metro area population, 2005 189,306

Population covered by DAWN 189,306

Percent of population covered by DAWN

100%

Metro area component	Drug-related		Drug-related suicide		Population
	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	15	7.9	5	2.6	189,306
1. Doña Ana County, NM	15	7.9	5	2.6	189,306

Lawton, OK



Deaths reported to DAWN

Drug-related 4
Drug-related suicide 0

Metro area population, 2005 110,629

Population covered by DAWN 110,629

Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	Drug-related		Drug-related suicide		
Metro area component	Deaths	Rate	Deaths	Rate	Population	
Total participating (1)	4	3.6	0	0.0	110,629	
1. Comanche County, OK	4	3.6	0	0.0	110,629	

Lewiston-Auburn, ME



Deaths reported to DAWN

Drug-related 12 Drug-related suicide 0

Metro area population, 2005 107,061

Population covered by DAWN 107,061

Percent of population covered by DAWN

100%

Metro area component	Drug-related		Drug-related suicide		Population	
	Deaths	Rate	Deaths	Rate	ropulation	
Total participating (1)	12	11.2	0	0.0	107,061	
1. Androscoggin County, ME	12	11.2	0	0.0	107,061	

Manchester-Nashua, NH



Deaths reported to DAWN

Drug-related 29
Drug-related suicide 4

Metro area population, 2005 400,516

Population covered by DAWN 400,516

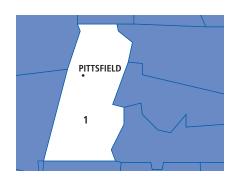
Percent of population covered by DAWN

100%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-related		Drug-relat	Population	
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	29	7.2	4	1.0	400,516
1. Hillsborough County, NH	29	7.2	4	1.0	400,516

Pittsfield, MA



Deaths reported to DAWN

Drug-related 11
Drug-related suicide 2

Metro area population, 2005 131,783

Population covered by DAWN 131,783

Percent of population covered by DAWN

100%

Metro area component	Drug-related		Drug-relate	Population	
	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	11	8.3	2	1.5	131,783
1. Berkshire County, MA	11	8.3	2	1.5	131,783

Salisbury, MD



Deaths reported to DAWN

Drug-related 14 Drug-related suicide 3

Metro area population, 2005 115,918

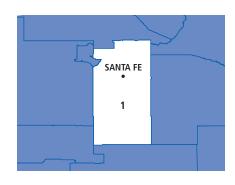
Population covered by DAWN 115,918

Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2005

Matura aura arunnan	Drug-related		Drug-relate	Donulation	
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (2)	14	12.1	3	2.6	115,918
1. Somerset County, MD	2	7.8	1	3.9	25,666
2. Wicomico County, MD	12	13.3	2	2.2	90,252

Santa Fe, NM



Deaths reported to DAWN

Drug-related 21
Drug-related suicide 2

Metro area population, 2005 140,801

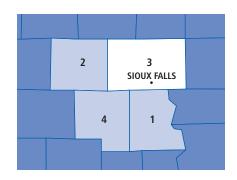
Population covered by DAWN 140,801

Percent of population covered by DAWN

100%

Metro area component	Drug-r	elated	Drug-relate	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	21	14.9	2	1.4	140,801
1. Santa Fe County, NM	21	14.9	2	1.4	140,801

Sioux Falls, SD



Deaths reported to DAWN

Drug-related 1
Drug-related suicide 4

Metro area population, 2005 207,882

Population covered by DAWN 160.051

Percent of population covered by DAWN

77%

Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-re	elated	Drug-relat	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	1	0.6	4	2.5	160,051
1. Lincoln County, SD					33,394
2. McCook County, SD					5,905
3. Minnehaha County, SD	1	0.6	4	2.5	160,051
4. Turner County, SD					8,532

Shaded areas did not participate in DAWN this year.

St. George, UT



Deaths reported to DAWN

Drug-related 13 Drug-related suicide 2

Metro area population, 2005 119,188

Population covered by DAWN 119,188

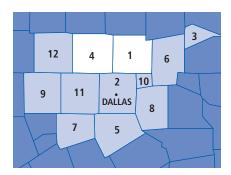
Percent of population covered by DAWN

100%

Metro area component	Drug-r	elated	Drug-relate	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (1)	13	10.9	2	1.7	119,188
1. Washington County, UT	13	10.9	2	1.7	119,188

ABBREVIATED PROFILES FOR AREAS WITH LESS THAN 50% POPULATION COVERAGE

Dallas-Fort Worth-Arlington, TX



Deaths reported to DAWN

Drug-related 79 Drug-related suicide 20

Metro area population, 2005 5,823,043

Population covered by DAWN 1,215,920

Percent of population covered by DAWN 21%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-re	elated	Drug-relate	ed suicide	Donulation
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (2)	79	6.5	20	1.6	1,215,920
1. Collin County, TX	44	6.7	13	2.0	660,926
2. Dallas County, TX					2,308,527
3. Delta County, TX					5,449
4. Denton County, TX	35	6.3	7	1.3	554,994
5. Ellis County, TX					133,527
6. Hunt County, TX					82,289
7. Johnson County, TX					146,509
8. Kaufman County, TX					88,901
9. Parker County, TX					102,665
10. Rockwall County, TX					62,844
11. Tarrant County, TX					1,619,666
12. Wise County, TX					56,746

Shaded areas did not participate in DAWN this year.

New Orleans-Metairie-Kenner, LA (Pre-Katrina)



Deaths reported to DAWN

Drug-related 92 Drug-related suicide 10

Metro area population, 2005 1,313,787

Population covered by DAWN 547,753

Percent of population covered by DAWN

42%

Metro area overview: Deaths and population by county, 2005

Metro area component	Drug-re	elated	Drug-relate	ed suicide	Population
wetro area component	Deaths	Rate	Deaths	Rate	ropulation
Total participating (3)	92	25.2	10	2.7	547,753
1. Jefferson Parish, LA	84	27.9	9	3.0	451,049
2. Orleans Parish, LA					452,170
3. Plaquemines Parish, LA					28,903
4. St. Bernard Parish, LA					65,147
5. St. Charles Parish, LA	4	11.9	1	3.0	50,554
6. St. John the Baptist Parish, LA	4	13.0	0	0.0	46,150
7. St. Tammany Parish, LA					219,814

Shaded areas did not participate in DAWN this year.

San Francisco-Oakland-Fremont, CA



Drug-related DAWN

Drug-related suicide 29

Metro area population, 2005 4,158,012

Population covered by DAWN 948,278

Percent of population covered by DAWN 23%

Metro area overview: Deaths and population by county, 2005

Matra area component	Drug-r	elated	Drug-relate	ed suicide	Population
Metro area component	Deaths	Rate	Deaths	Rate	Population
Total participating (2)	97	10.2	29	3.1	948,278
1. Alameda County, CA					1,451,065
2. Contra Costa County, CA					1,017,644
3. Marin County, CA	23	9.3	6	2.4	247,103
4. San Francisco County, CA					741,025
5. San Mateo County, CA	74	10.6	23	3.3	701,175

Shaded areas did not participate in DAWN this year.

AREA SPOTLIGHTS

Albuquerque, NM: Bernalillo County, NM



Bernalillo County, NM: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	142
Drug-related suicide	18
Population	603,783

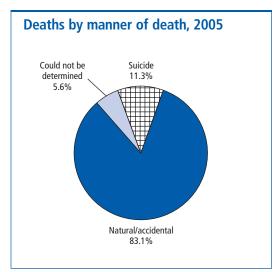
Deaths per 100,000 population

Drug-related	23.5
Drug-related suicide	3.0

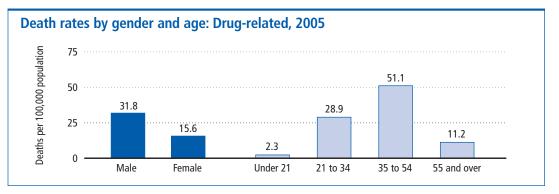
Drug-related deaths by drug category, 2004-2005

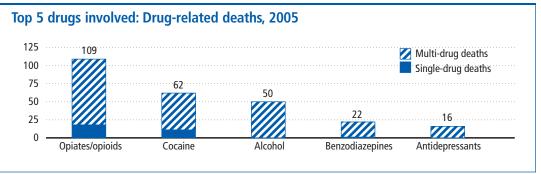
	[Orug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	130	142	37	13	18	8
Alcohol*	38	50	0	6	6	0
Cocaine	47	62	11			0
Marijuana	0	5	0	0	0	0
Stimulants	9	10	4			0
Club drugs†	0	0	0	0	0	0
Hallucinogens††		0	0	0	0	0
Inhalants	0			0	0	0
Antidepressants	12	16	0	6		
Antipsychotics	0		0	0	0	0
Benzodiazepines	13	22			4	0
Misc. anxiolytics, sedatives, and hypnotics	4	5	0	0		0
Opiates/opioids	96	109	18	8	10	6
Heroin (specified)	38	54	13			
Methadone	25	20	4		0	0
All other opiates/opioids	43	45		6	8	5
Nonsteroidal anti- inflammatory agents			0		0	0
Salicylates/combinations	0	0	0	0		0
Misc. analgesics/combinations	5				0	0
Anticonvulsants		4	0	0		0
Muscle relaxants	4	6	0	0		0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	33
Home	60
Public place	19
Other	30
Not documented	0
	0 Deaths
Drug-related suicide	Deaths
Drug-related suicide Health care facility Home	4
Drug-related suicide Health care facility Home Public place	4 10
Drug-related suicide Health care facility Home Public place	4 10





NOTES: 1. Drug-related deaths exclude suicides.

- 2. All death rates are per 100,000 population.
- 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

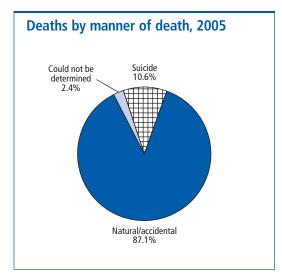
Atlanta-Sandy Springs-Marietta, GA: Fulton County, GA



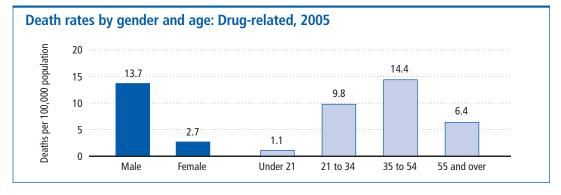
Drug-related deaths by drug category, 2004-2005

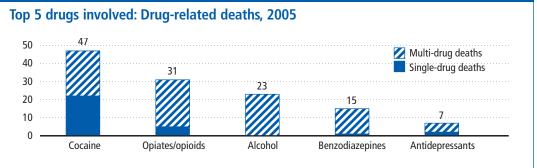
	[Orug-relate	d	Drug	j-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	90	76	31	10	9	
Alcohol*	22	23	0	4		
Cocaine	61	47	22	0		
Marijuana	0		0	0	0	
Stimulants	8	4		0		
Club drugs†			0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	4	7		4	6	
Antipsychotics	0		0			
Benzodiazepines	10	15			5	
Misc. anxiolytics, sedatives, and hypnotics			0		0	
Opiates/opioids	37	31	5			
Heroin (specified)			0	0	0	
Methadone	5	6	0	0	0	
All other opiates/opioids	33	28	5			
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	
Salicylates/combinations	0	0	0		0	
Misc. analgesics/combinations			0	0		
Anticonvulsants	0	0	0	0	0	
Muscle relaxants			0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	21
Home	32
Public place	10
Other	13
	0
Not documented	0
Not documented Drug-related suicide	0
Not documented Drug-related suicide Health care facility	0 Deaths
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 0 7
Not documented	0 Deaths 0 7 0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Baltimore-Towson, MD: Baltimore City, MD



Baltimore City, MD: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	285
Drug-related suicide	
Donulation	626 277

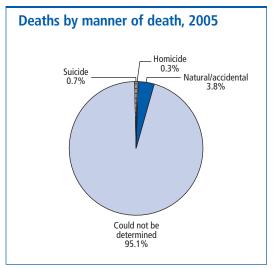
Deaths per 100,000 population

Drug-related	44.8
Drug-related suicide	0.3

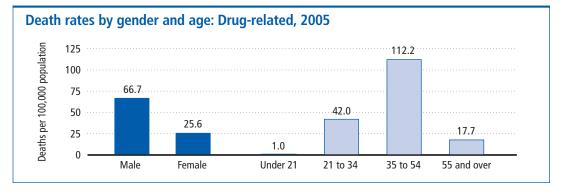
Drug-related deaths by drug category, 2004-2005

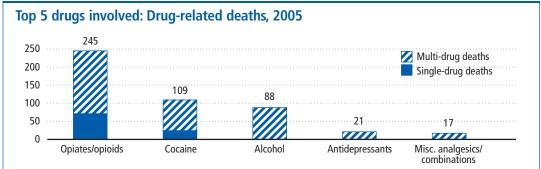
		Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	286	285	97	5		
Alcohol*	100	88	0			
Cocaine	129	109	24			
Marijuana		0	0	0		
Stimulants	0		0	0		
Club drugs†	0	0	0	0		
Hallucinogens††	0		0	0		
Inhalants		0	0	0		
Antidepressants	37	21	0			
Antipsychotics	6		0			
Benzodiazepines	7	6	0			
Misc. anxiolytics, sedatives, and hypnotics	19	17	0			
Opiates/opioids	244	245	71			
Heroin (specified)	42	10	0	0		
Methadone	65	72	29	0		
All other opiates/opioids	212	197	42			
Nonsteroidal anti- inflammatory agents	0	0	0	0		
Salicylates/combinations	0	0	0	0		
Misc. analgesics/combinations	18	17	0			
Anticonvulsants	0	0	0	0		
Muscle relaxants	5	4		0		

- * Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.
- † Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.
- ^{††} Includes PCP, LSD, and miscellaneous hallucinogens.



Drug-related	Deaths
Health care facility	133
Home	96
Public place	10
Other	46
NI . I . I	Λ.
Not documented	U
	Deaths
Drug-related suicide	Deaths
Drug-related suicide Health care facility Home	
Drug-related suicide Health care facility Home Public place	 0 0
Public place Other	





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

Baltimore-Towson, MD: Baltimore County, MD



Baltimore County, MD: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	87
Drug-related suicide	12
Population	783.405

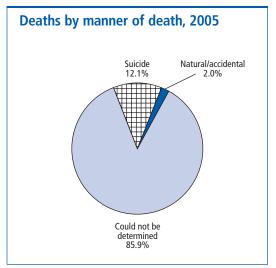
Deaths per 100,000 population

Drug-related		11.1
Drug-related suic	de	1.5

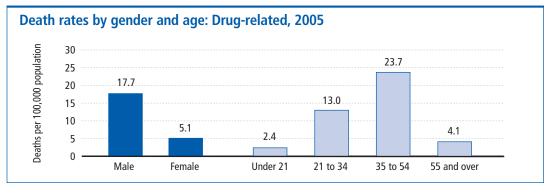
Drug-related deaths by drug category, 2004-2005

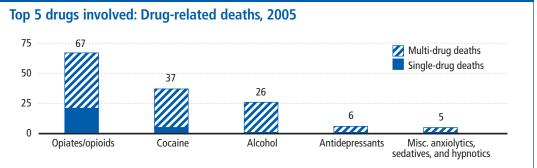
	[Orug-relate	d	Drug	j-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	91	87	30	13	12	
Alcohol*	31	26				
Cocaine	34	37	5			
Marijuana	0	0	0	0	0	
Stimulants		0	0	0	0	
Club drugs†	0	0	0	0	0	
Hallucinogens††		0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	14	6			4	
Antipsychotics	4			0		
Benzodiazepines	7	4	0	0		
Misc. anxiolytics, sedatives, and hypnotics	18	5		6	4	
Opiates/opioids	71	67	21	7	4	
Heroin (specified)	12		0	0	0	
Methadone	24	29	13	0		
All other opiates/opioids	57	45	8	7	4	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	
Salicylates/combinations		0	0	0	0	
Misc. analgesics/combinations	14	4	0	5	4	
Anticonvulsants			0	0		
Muscle relaxants			0	0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	27
Home	46
Public place	
Other	12
Not documented	0
Not documented	0
Not documented Drug-related suicide	0
Not documented Drug-related suicide Health care facility Home	0 Deaths 9
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 9
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 9





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Boston-Cambridge-Quincy, MA-NH: Essex County, MA



Essex County, MA: Deaths and population, 2005

Deaths reported	d to DAWN
Drug-related	

Drug-related suicide......11 **Population**734,261

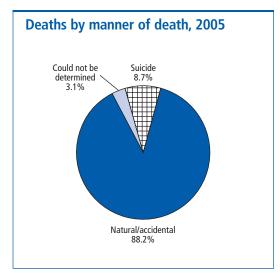
Deaths per 100,000 population

Drug-related	15.8
Drug-related suicide	1.5

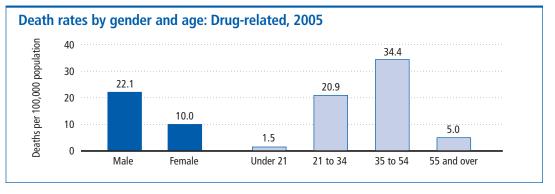
Drug-related deaths by drug category, 2004-2005

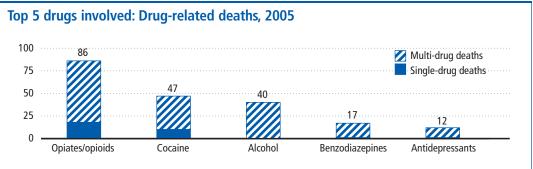
	[)rug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	79	116	38	11	11	
Alcohol*	24	40	0		5	
Cocaine	19	47	10			
Marijuana			0	0	0	
Stimulants		0	0	0	0	
Club drugs†	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	11	12			7	
Antipsychotics			0	5		
Benzodiazepines	9	17				
Misc. anxiolytics, sedatives, and hypnotics			0		0	
Opiates/opioids	57	86	18			
Heroin (specified)	25	24	5	0	0	
Methadone	9	20	5	0	0	
All other opiates/opioids	24	51	8			
Nonsteroidal anti- inflammatory agents	0	0	0	0		
Salicylates/combinations	0			0	0	
Misc. analgesics/combinations	0			0		
Anticonvulsants	0	0	0	0		
Muscle relaxants	0			0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	52
Home	49
Public place	
Other	14
Not documented	0
Not documented	0
Not documented Drug-related suicide	0
Not documented Drug-related suicide Health care facility Home	0 Deaths 6
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 6
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 6





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Boston-Cambridge-Quincy, MA-NH: Middlesex County, MA



Middlesex County, MA: Deaths and population, 2005

Deaths reported	to	DAWN
Drug-related		

Drug-related	150
Drug-related suicide	20
Population	.1,464,985

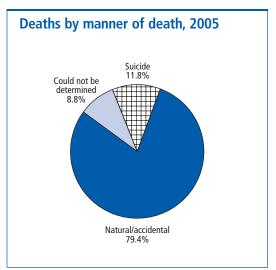
Deaths per 100,000 population

Drug-related	10.2
Drug-related suicide	1.4

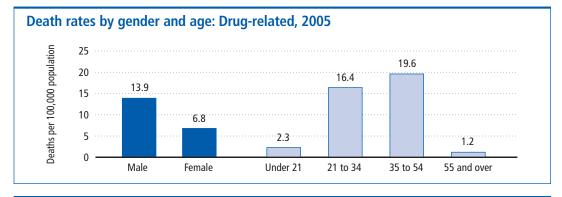
Drug-related deaths by drug category, 2004-2005

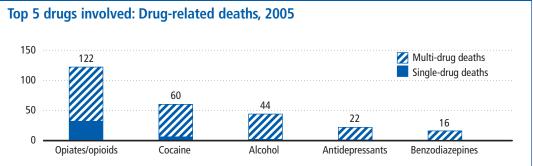
		rug-relate)	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	121	150	43	11	20	6
Alcohol*	42	44		4	6	
Cocaine	49	60	6	4		0
Marijuana			0		0	0
Stimulants		5	0	0	0	0
Club drugs†	0		0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants		0	0		0	0
Antidepressants	10	22		0	6	
Antipsychotics		6	0		5	0
Benzodiazepines	12	16	0			0
Misc. anxiolytics, sedatives, and hypnotics			0			
Opiates/opioids	93	122	32		8	
Heroin (specified)	39	37	16	0	0	0
Methadone	13	21	5	0		0
All other opiates/opioids	46	69	11		8	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0
Salicylates/combinations	0	0	0	0	0	0
Misc. analgesics/combinations			0		0	0
Anticonvulsants	0	0	0	0	0	0
Muscle relaxants	0	0	0	0	0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	63
Home	64
Public place	4
Other	19
Not documented	0
Not documented	
Drug-related suicide	Deaths 0
Drug-related suicide Health care facility Home	Deaths 0 16
Drug-related suicide Health care facility Home	Deaths 0
Drug-related suicide Health care facility Home	Deaths 0 16





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Boston-Cambridge-Quincy, MA-NH: Norfolk County, MA



Norfolk County, MA: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	. 60
Drug-related suicide	.11

Population652,530

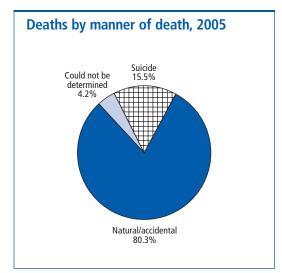
Deaths per 100,000 population

Drug-related	9.2
Drug-related suicide	1.7

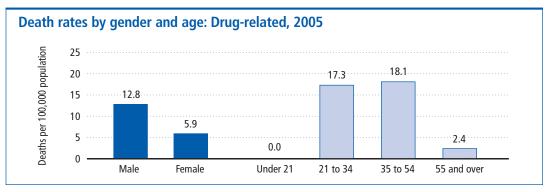
Drug-related deaths by drug category, 2004-2005

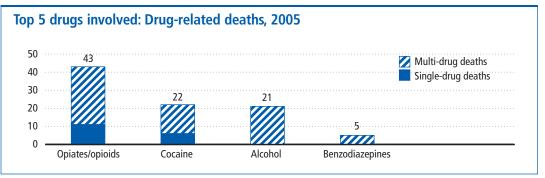
	[Orug-relate	d	Drug	j-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	55	60	20	9	11	
Alcohol*	16	21	0	5	4	
Cocaine	17	22	6			
Marijuana	0	0	0	0	0	
Stimulants	0	0	0	0	0	
Club drugs†	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	8		0		4	
Antipsychotics	0			0		
Benzodiazepines		5	0			
Misc. anxiolytics, sedatives, and hypnotics			0			
Opiates/opioids	37	43	11	0		
Heroin (specified)	16	11	4	0	0	
Methadone	4		0	0	0	
All other opiates/opioids	20	32	7	0		
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	
Salicylates/combinations	0			0		
Misc. analgesics/combinations			0	0		
Anticonvulsants		0	0	0	0	
Muscle relaxants	0	0	0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	22
Home	31
Public place	0
Other	7
Not documented	0
Not documented	0 Deaths
Not documented Drug-related suicide	0
Not documented Drug-related suicide Health care facility Home	0 Deaths 6
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 6 0
Not documented Drug-related suicide Health care facility Home	0 Deaths 6 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Boston-Cambridge-Quincy, MA-NH: Plymouth County, MA



Plymouth County, MA: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	65
Drug-related suicide	7
Population	491,934

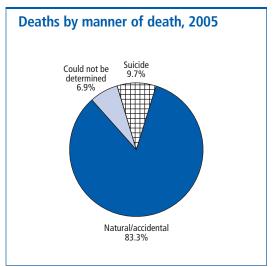
Deaths per 100,000 popu	ılation
Drug related	

Drug-related	13.2
Drug-related suicide	1.4

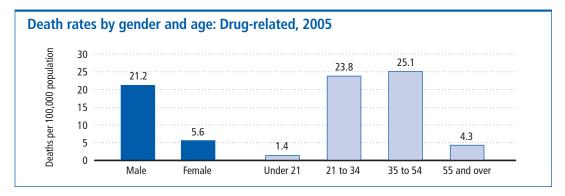
Drug-related deaths by drug category, 2004-2005

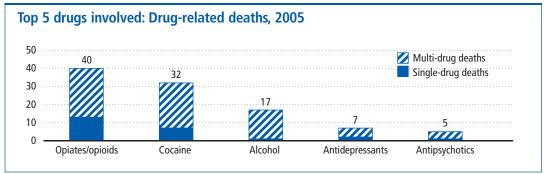
	[Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	33	65	28		7	5
Alcohol*	8	17			0	0
Cocaine	16	32	7		0	0
Marijuana			0		0	0
Stimulants	0	0	0		0	0
Club drugs†	0	0	0		0	0
Hallucinogens††	0	0	0		0	0
Inhalants	0	0	0		0	0
Antidepressants	4	7				
Antipsychotics		5				
Benzodiazepines	0				0	0
Misc. anxiolytics, sedatives, and hypnotics	0		0			0
Opiates/opioids	22	40	13			0
Heroin (specified)	12	9			0	0
Methadone		6			0	0
All other opiates/opioids	10	27	9			0
Nonsteroidal anti- inflammatory agents	0	0	0		0	0
Salicylates/combinations	0					
Misc. analgesics/combinations	0		0			0
Anticonvulsants	0	0	0		0	0
Muscle relaxants	0	0	0		0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	27
Home	26
Public place	4
Other	8
Not documented	0
Drug-related suicide	
Drug-related suicide Health care facility Home	Deaths
Drug-related suicide Health care facility Home Public place	Deaths
Drug-related suicide Health care facility Home Public place	Deaths





NOTES: 1. Drug-related deaths exclude suicides.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

Boston-Cambridge-Quincy, MA-NH: Suffolk County, MA



Suffolk County, MA: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related155	,
Drug-related suicide3	

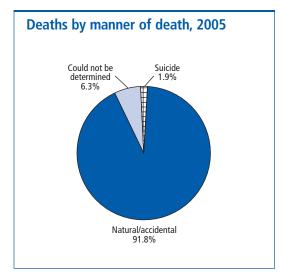
Population6	91,965
Deaths per 100,000 population	

Drug-related		 22.4
Drug-related s	uicide	 0.4

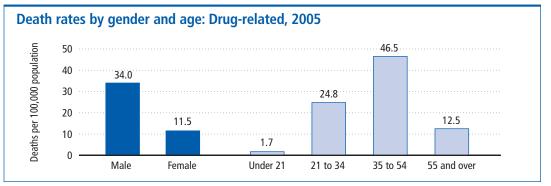
Drug-related deaths by drug category, 2004-2005

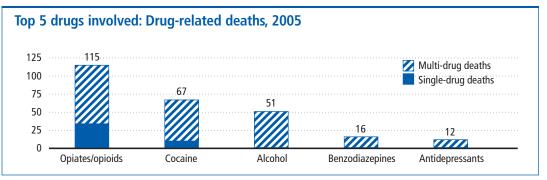
	[Orug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	128	155	56	13		
Alcohol*	36	51		4		
Cocaine	53	67	10			
Marijuana		5	0	0		
Stimulants			0	0		
Club drugs†				0		
Hallucinogens††	0	0	0	0		
Inhalants	0	0	0	0		
Antidepressants	11	12		4		
Antipsychotics			0			
Benzodiazepines	9	16				
Misc. anxiolytics, sedatives, and hypnotics		0	0	0		
Opiates/opioids	91	115	34	4		
Heroin (specified)	44	18	9	0		
Methadone	8	19		0		
All other opiates/opioids	41	87	22	4		
Nonsteroidal anti- inflammatory agents	0		0	0		
Salicylates/combinations	0		0	0		
Misc. analgesics/combinations			0			
Anticonvulsants		0	0	0		
Muscle relaxants		0	0	0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	55
Home	60
Public place	11
Other	29
Not documented	0
	0 Deaths
Not documented Drug-related suicide Health care facility	0 Deaths
Drug-related suicide Health care facility Home	0 Deaths
Drug-related suicide Health care facility Home Public place	 0
Drug-related suicide Health care facility Home	 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Buffalo-Niagara Falls, NY: Erie County, NY



Erie County, NY: Deaths and population, 2005 Deaths reported to DAWN

Drug-related	82
Drug-related suicide	11
Population	928,215

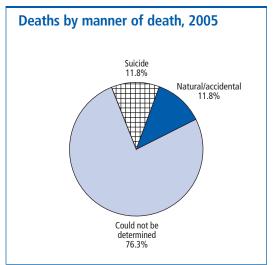
Deaths per 100,000 population

Drug-related	8.8
Drug-related suicide	1.2

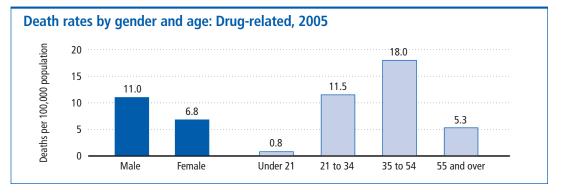
Drug-related deaths by drug category, 2004-2005

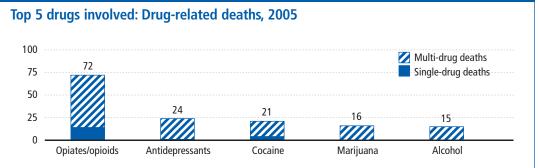
		Drug-related Drug-related suicide			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
ALL DRUGS	86	82	20	8	11		
Alcohol*	28	15	0	4			
Cocaine	30	21	4	0			
Marijuana	13	16	0	0	0		
Stimulants	0		0	0	0		
Club drugs†	0	0	0	0	0		
Hallucinogens††	0	0	0	0	0		
Inhalants	0	0	0	0			
Antidepressants	22	24		4			
Antipsychotics	7	4					
Benzodiazepines	24	12	0				
Misc. anxiolytics, sedatives, and hypnotics	17	9	0		4		
Opiates/opioids	74	72	14	4			
Heroin (specified)	26	25	7	0	0		
Methadone	6	16		0	0		
All other opiates/opioids	55	39	6	4			
Nonsteroidal anti- inflammatory agents	0	0	0	0	0		
Salicylates/combinations	0	0	0	0			
Misc. analgesics/combinations		9	0				
Anticonvulsants	6		0	0	0		
Muscle relaxants	9		0		0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	29
Home	43
Public place	
Other	8
Not documented	0
	0 Deaths
Not documented Drug-related suicide	0 Deaths
Not documented	0 Deaths 8
Not documented Drug-related suicide Health care facility Home Public place	 8
Not documented Drug-related suicide Health care facility Home Public place Other	





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Chicago-Naperville-Joliet, IL-IN-WI: Cook County, IL



Cook County, IL: Deaths and population, 2005

Deaths	repor	ted to	DAWN	

_		_	_		_		_
	Drug-related suicide					2	9
	Drug-related	••••	•••	••••	. 3	Ö	4

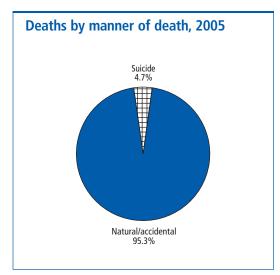
Deaths per 100,000 population

Drug-related.			 	11.0
Drug-related	suicide	e	 	0.5

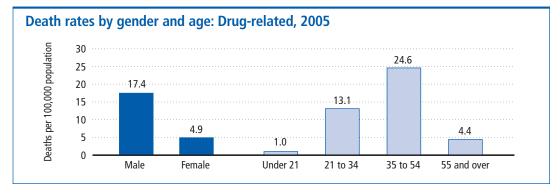
Drug-related deaths by drug category, 2004-2005

	[Orug-relate	d	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	573	582	337	38	29	10
Alcohol*	94	97		7	6	0
Cocaine	399	391	209		0	0
Marijuana	0	0	0	0	0	0
Stimulants	0	0	0	0	0	0
Club drugs†	0	0	0	0		0
Hallucinogens††		0	0	0	0	0
Inhalants	0	0	0	0		
Antidepressants	7			13	9	
Antipsychotics	0	0	0	7	4	
Benzodiazepines			0	6	11	
Misc. anxiolytics, sedatives, and hypnotics			0	6	8	
Opiates/opioids	346	344	123	7	5	
Heroin (specified)	0	0	0	0	0	0
Methadone	31	36	18	0		
All other opiates/opioids	321	313	105	7	4	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0
Salicylates/combinations	0	0	0		0	0
Misc. analgesics/combinations		4	0		5	
Anticonvulsants	0					0
Muscle relaxants	0		0			0

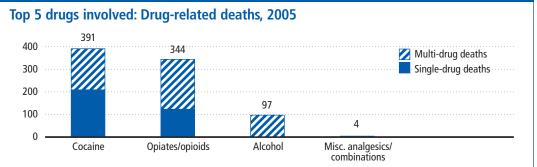
^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	283
Home	217
Public place	32
Other	49
Not documented	
	Deaths
Drug-related suicide	Deaths 8
Drug-related suicide Health care facility Home	17
Drug-related suicide Health care facility Home Public place	8 17



Not documented



- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

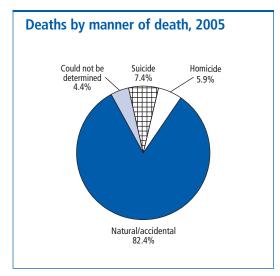
Chicago-Naperville-Joliet, IL-IN-WI: Lake County, IL



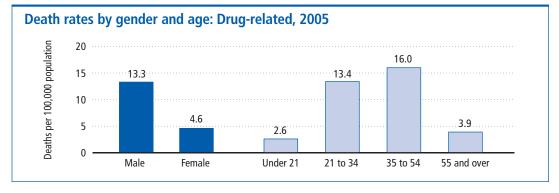
Drug-related deaths by drug category, 2004-2005

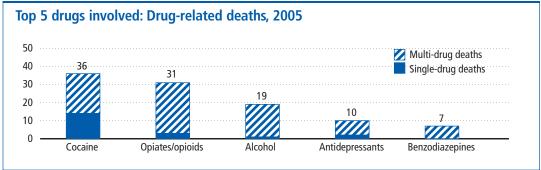
		Orug-relate	d	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	53	63	22	6	5	0
Alcohol*	7	19				
Cocaine	24	36	14			•••••
Marijuana	5	7	0	0	0	•••••
Stimulants			0	0	0	
Club drugs†	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants	0	0	0	0	0	
Antidepressants	7	10				
Antipsychotics				0	0	
Benzodiazepines	6	7	0	0	0	
Misc. anxiolytics, sedatives, and hypnotics	5		0			
Opiates/opioids	42	31			0	
Heroin (specified)	19	13		0	0	•
Methadone	5	4		0	0	
All other opiates/opioids	22	18			0	
Nonsteroidal anti- inflammatory agents		0	0	0	0	
Salicylates/combinations				0		
Misc. analgesics/combinations	0		0	0		
Anticonvulsants			0	0	0	
Muscle relaxants	7		0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	4
Home	43
Public place	8
Other	5
Not documented	
Not documented	 Deaths
Not documented Drug-related suicide	
Not documented Drug-related suicide Health care facility	
Not documented Drug-related suicide Health care facility Home Public place	Deaths 0 4
	Deaths 0 4





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Denver-Aurora, CO: Adams County, CO



Adams County, CO: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	64
Drug-related suicide	17
Population	402,219

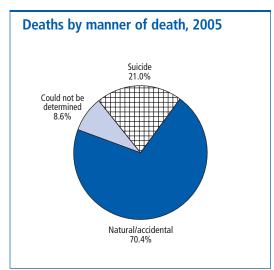
Deaths per 100,000 population

Drug-related	15.9
Drug-related suicide	4.2

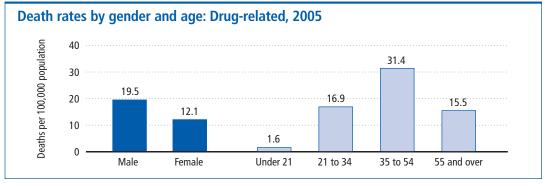
Drug-related deaths by drug category, 2004-2005

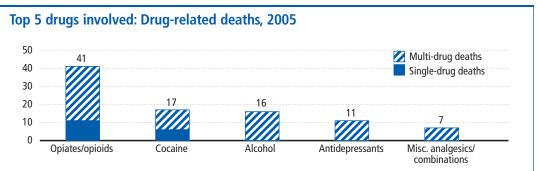
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS		64	23		17	5
Alcohol*		16	0		5	0
Cocaine		17	6			
Marijuana		4	0			0
Stimulants		6			0	0
Club drugs†			0		0	0
Hallucinogens††		0	0		0	0
Inhalants					0	0
Antidepressants		11	0		6	0
Antipsychotics		4	0			0
Benzodiazepines		6	0			0
Misc. anxiolytics, sedatives, and hypnotics			0			
Opiates/opioids		41	11		6	
Heroin (specified)		0	0		0	0
Methadone		8				
All other opiates/opioids		36	8		4	0
Nonsteroidal anti- inflammatory agents		0	0		0	0
Salicylates/combinations					0	0
Misc. analgesics/combinations		7	0		5	
Anticonvulsants			0			0
Muscle relaxants		4	0		0	0

- * Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.
- † Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.
- †† Includes PCP, LSD, and miscellaneous hallucinogens.



Drug-related	Deaths
Health care facility	14
Home	38
Public place	4
Other	8
Not documented	0
Drug-related suicide	Deaths
Health care facility	5
Home	9
Public place	
Other	0
Not documented	0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

Denver-Aurora, CO: Denver County, CO



Denver County, CO: Deaths and population, 2005

Deaths	reported	to	DAWN
--------	----------	----	------

Drug-relateu	1 JZ
Drug-related suicide	26
Population	558,663

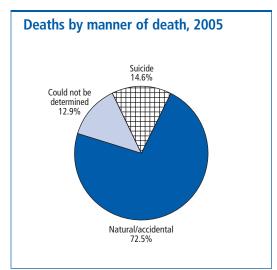
Deaths per 100,000 population

Drug-related	27.2
Drug-related suicide	4.7

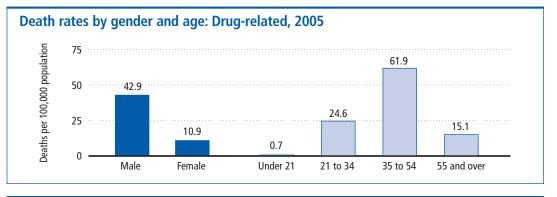
Drug-related deaths by drug category, 2004-2005

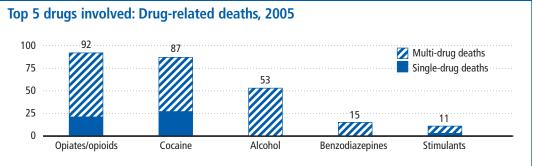
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	128	152	52	18	26	11
Alcohol*	63	53	0	4	6	0
Cocaine	62	87	27			0
Marijuana			0	0	0	0
Stimulants	11	11		0		0
Club drugs†		0	0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants			0		0	0
Antidepressants	6	5	0	7	8	
Antipsychotics			0	4		0
Benzodiazepines	16	15	0		7	0
Misc. anxiolytics, sedatives, and hypnotics		5	0			0
Opiates/opioids	79	92	21		13	6
Heroin (specified)		4	0	0		
Methadone	9	14	4			
All other opiates/opioids	71	78	17		9	4
Nonsteroidal anti- inflammatory agents	0	0	0	0		0
Salicylates/combinations	0	0	0			
Misc. analgesics/combinations	5	7		6	5	0
Anticonvulsants			0	0	0	0
Muscle relaxants			0			0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	45
Home	70
Public place	12
Other	25
Not documented	0
Drug-related suicide	Deaths
	Deaths 5
Health care facility Home	5 18
Health care facility Home Public place	5 18
Public place	5 18





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Detroit-Warren-Livonia, MI: Macomb County, MI



Macomb County, MI: Deaths and population, 2005

Deaths reported	to	DAWN	
Drug-related			

Drug-related	111
Drug-related suicide	16
Population	828 950

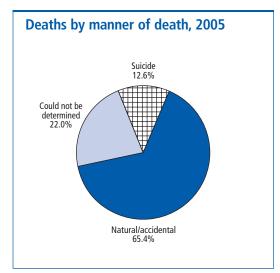
Deaths per 100,000 population

Drug-related	13.4
Drug-related suicide	1.9

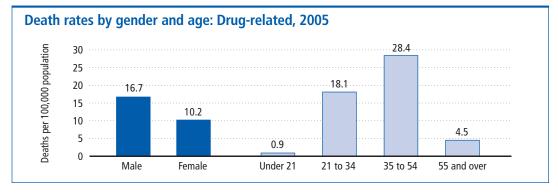
Drug-related deaths by drug category, 2004-2005

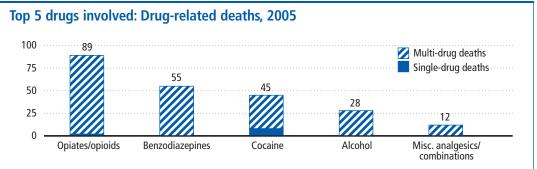
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	110	111	10	9	16	
Alcohol*	28	28	0		5	
Cocaine	48	45	8	0		
Marijuana	11	11	0	0		
Stimulants			0	0	0	
Club drugs†	0		0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants		4	0	0	0	
Antidepressants	16	8	0	4		
Antipsychotics		4	0			
Benzodiazepines	46	55	0	4	9	
Misc. anxiolytics, sedatives, and hypnotics	11	11	0	0	4	
Opiates/opioids	96	89		4	8	
Heroin (specified)	27	40	0	0		
Methadone	11	18			0	
All other opiates/opioids	85	81			8	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	
Salicylates/combinations	0	0	0	0		
Misc. analgesics/combinations	15	12	0		4	
Anticonvulsants	0		0	0		
Muscle relaxants	8	6	0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	29
Home	70
Public place	4
Other	8
Not documented	0
Not documented	<u>v</u>
Drug-related suicide	
Drug-related suicide Health care facility Home	Deaths 9
Drug-related suicide Health care facility Home	Deaths
Drug-related suicide Health care facility Home	Deaths 9





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Detroit-Warren-Livonia, MI: Oakland County, MI



Oakland County, MI: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	144
Drug-related suicide	17
Population	1,213,669

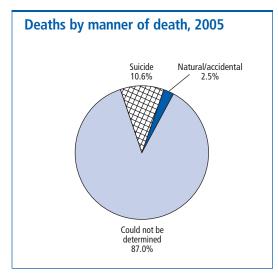
Deaths per 100,000 population

Drug-related	11.9
Drug-related suicide	1.4

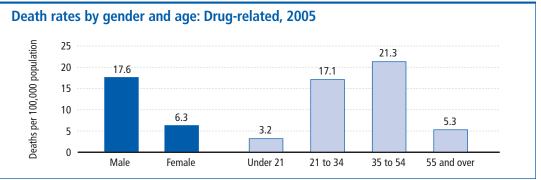
Drug-related deaths by drug category, 2004-2005

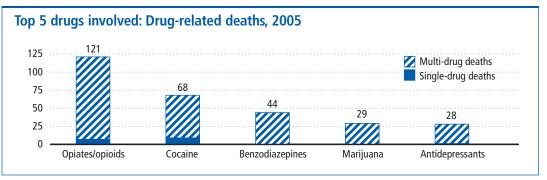
	[Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
ALL DRUGS	120	144	19	28	17		
Alcohol*	31	23	0	12	6		
Cocaine	53	68	9	8	0		
Marijuana	33	29	0	9			
Stimulants		4	0	0			
Club drugs†	0		0	0	0		
Hallucinogens††	0	0	0	0	0		
Inhalants	0			0	0		
Antidepressants	15	28		8	6		
Antipsychotics	4	4	0				
Benzodiazepines	24	44	0	7	6		
Misc. anxiolytics, sedatives, and hypnotics	6	7	0		6		
Opiates/opioids	81	121	7	9	8		
Heroin (specified)	5		0	0	0		
Methadone	17	25			0		
All other opiates/opioids	71	109	5	8	8		
Nonsteroidal anti- inflammatory agents	0	0	0	0	0		
Salicylates/combinations		0	0	0			
Misc. analgesics/combinations	4	14		5	10		
Anticonvulsants			0				
Muscle relaxants	10	15	0	4			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	38
Home	80
Public place	
Other	23
Not documented	0
•••••	
Drug-related suicide	Deaths
	Deaths
Health care facility Home	
Health care facility Home Public place	 8
Public place	 8 4





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Detroit-Warren-Livonia, MI: Wayne County, MI



Wayne County, MI: Deaths and population, 2005

Deaths rep	orted to DAWN	
Drug-relat	ed	

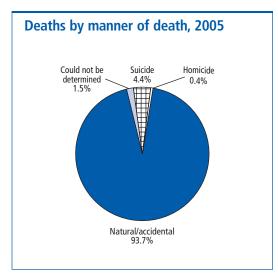
Deaths per 100,000 population

Drug-related	22.0
Drug-related suicide	1.0

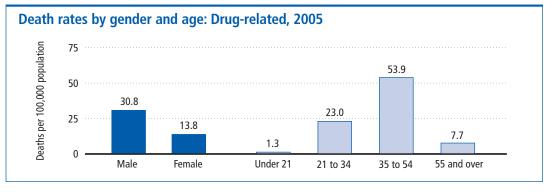
Drug-related deaths by drug category, 2004-2005

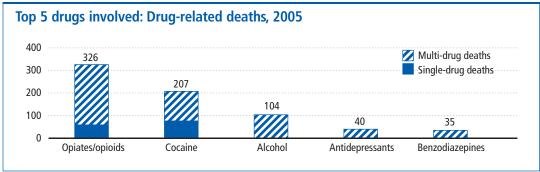
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	402	438	140	13	20	5
Alcohol*	93	104	0		5	0
Cocaine	217	207	76		5	0
Marijuana	0	0	0	0	0	0
Stimulants		0	0	0	0	0
Club drugs†		0	0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants		0	0	0	0	0
Antidepressants	107	40		7	8	
Antipsychotics	29	13		5		0
Benzodiazepines	119	35	0	6	4	
Misc. anxiolytics, sedatives, and hypnotics	98	28	0	5	4	0
Opiates/opioids	327	326	59	7	12	
Heroin (specified)	162	65	0	0	0	0
Methadone	53	49	10	0		0
All other opiates/opioids	300	298	49	7	11	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0
Salicylates/combinations	0	0	0		0	0
Misc. analgesics/combinations	9	9		0		
Anticonvulsants	8		0	0	0	0
Muscle relaxants	26	8	0	0		0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	161
Home	227
Public place	
Other	48
Not documented	
Not documented	 Deaths
	
Not documented Drug-related suicide Health care facility Home	 Deaths 14
Not documented Drug-related suicide Health care facility Home Public place	Deaths 14
Not documented Drug-related suicide Health care facility Home Public place	Deaths 14 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Kansas City, MO-KS: Jackson County, MO



Jackson County, MO: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	75
Drug-related suicide	15
Population	662,133

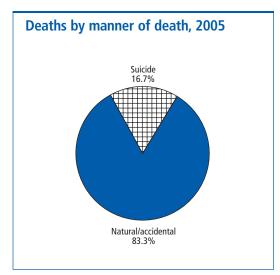
Deaths per 100,000 population

Drug-related	11.3
Drug-related suicide	2.3

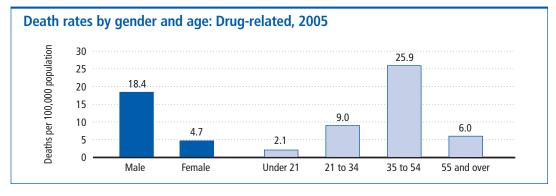
Drug-related deaths by drug category, 2004-2005

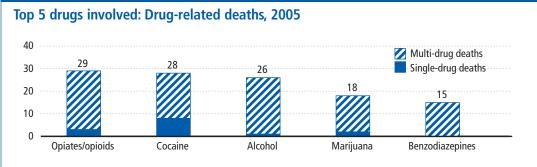
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS		75	21		15	
Alcohol*		26			8	
Cocaine		28	8			
Marijuana		18			0	
Stimulants		10	5			
Club drugs†					0	
Hallucinogens††		0	0		0	
Inhalants			0			
Antidepressants		13			4	
Antipsychotics			0			
Benzodiazepines		15	0		4	
Misc. anxiolytics, sedatives, and hypnotics		8	0		4	
Opiates/opioids		29			5	
Heroin (specified)		0	0		0	
Methadone		16			0	
All other opiates/opioids		17			5	
Nonsteroidal anti- inflammatory agents			0		0	
Salicylates/combinations		0	0			
Misc. analgesics/combinations		4	0		0	
Anticonvulsants		0	0			
Muscle relaxants		4	0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	18
Home	39
Public place	
Other	16
Not documented	0
Not documented	
	Deaths
Drug-related suicide	
Drug-related suicide Health care facility Home	Deaths
Drug-related suicide Health care facility Home Public place	Deaths 13
Drug-related suicide Health care facility Home	Deaths 13 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Minneapolis-St. Paul-Bloomington, MN-WI: Hennepin County, MN



Hennepin County, MN: Deaths and population, 2005

Deaths reported to DAWN

	Drug relateu	. 00
-	Drug-related suicide	.16
Po	pulation 1.118	746

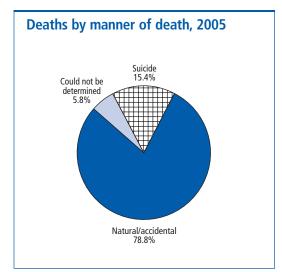
Deaths per 100,000 population

Drug-related	7.9
Drug-related suicide	1.4

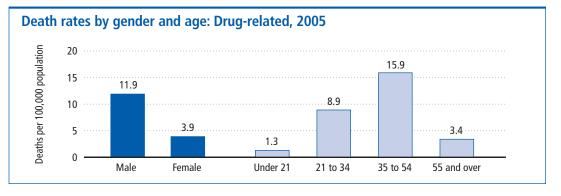
Drug-related deaths by drug category, 2004-2005

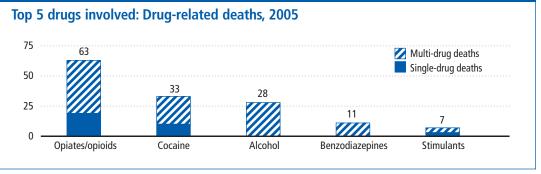
	[Orug-relate	d	Drug	j-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	68	88	37	18	16	4
Alcohol*	22	28	0		5	0
Cocaine	24	33	10	0		0
Marijuana	0	0	0	0	0	0
Stimulants	6	7		0	0	0
Club drugs†			0	0	0	0
Hallucinogens††		0	0	0	0	0
Inhalants	0	0	0	0	0	0
Antidepressants				4	4	0
Antipsychotics	0		0		5	
Benzodiazepines	6	11	0	4		0
Misc. anxiolytics, sedatives, and hypnotics	0		0		4	
Opiates/opioids	47	63	19	6	9	
Heroin (specified)	9	5	0	0	0	0
Methadone	10	13		0		0
All other opiates/opioids	28	53	16	6	8	
Nonsteroidal anti- inflammatory agents	0			0	0	0
Salicylates/combinations		0	0	0	0	0
Misc. analgesics/combinations		0	0	8		0
Anticonvulsants	0	0	0	0	0	0
Muscle relaxants	0		0	0	0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	12
Home	59
Public place	
Other	14
Not documented	0
Drug-related suicide	Deaths
	Deaths
Health care facility Home	
Health care facility Home Public place	 13
Public place	 13 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

New Orleans-Metairie-Kenner, LA (Pre-Katrina): Jefferson Parish, LA

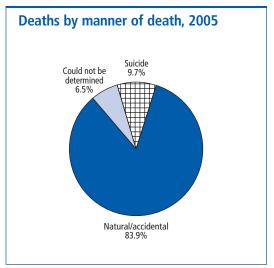


Drug-related suicide......3.0

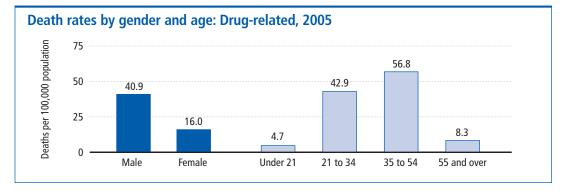
Drug-related deaths by drug category, 2004-2005

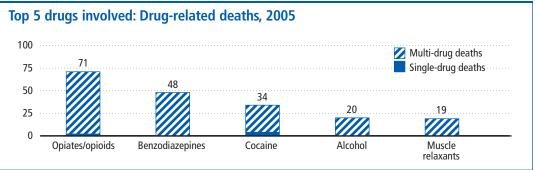
	[Orug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS		84	7		9	
Alcohol*		20	0			
Cocaine		34	4		0	
Marijuana		9	0			
Stimulants		7	0			
Club drugs†		0	0		0	
Hallucinogens††		0	0		0	
Inhalants		0	0		0	
Antidepressants		13	0			
Antipsychotics		0	0		0	
Benzodiazepines		48	0			
Misc. anxiolytics, sedatives, and hypnotics		8	0			
Opiates/opioids		71			6	
Heroin (specified)			0		0	
Methadone		33	0		0	
All other opiates/opioids		56			6	
Nonsteroidal anti- inflammatory agents		0	0		0	
Salicylates/combinations		0	0		0	
Misc. analgesics/combinations		13	0			
Anticonvulsants			0		0	
Muscle relaxants		19	0			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	21
Home	50
Public place	0
Other	11
Not documented	
Not documented	 Deaths
Not documented Drug-related suicide	
Not documented Drug-related suicide Health care facility Home	 Deaths 5
Not documented Drug-related suicide Health care facility Home Public place	Deaths 5
Not documented Drug-related suicide Health care facility Home Public place	Deaths 5 0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

New Orleans-Metairie-Kenner, LA (Post-Katrina): Jefferson Parish, LA



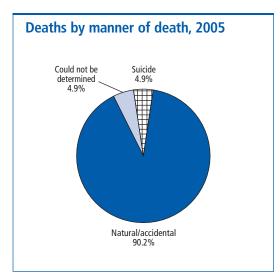
Drug-related suicide	2
Population	358,273
Deaths per 100,000 population	

Drug-related suicide......1.7

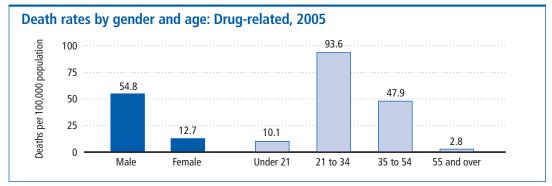
Drug-related deaths by drug category, 2004-2005

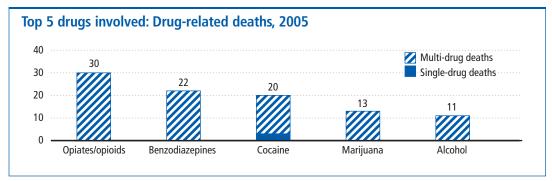
		Prug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS		39				0
Alcohol*		11				
Cocaine		20				•
Marijuana		13				•
Stimulants		5				•
Club drugs†		0				•
Hallucinogens††		0				•
Inhalants		0				• · · · · · · · · · · · · · · · · · · ·
Antidepressants		4				•
Antipsychotics		0				•
Benzodiazepines		22				•
Misc. anxiolytics, sedatives, and hypnotics						•
Opiates/opioids		30				•
Heroin (specified)						•
Methadone		20				•
All other opiates/opioids		14				•
Nonsteroidal anti- inflammatory agents						
Salicylates/combinations		0				•
Misc. analgesics/combinations						•
Anticonvulsants		0				•
Muscle relaxants		10				•

- * Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.
- † Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.
- †† Includes PCP, LSD, and miscellaneous hallucinogens.



Drug-related	Deaths
Health care facility	8
Home	16
Public place	
Other	14
Not documented	0
Drug-related suicide	0 Deaths
Drug-related suicide	0 Deaths
Drug-related suicide Health care facility Home	0
Drug-related suicide Health care facility Home Public place	0 0
Drug-related suicide Health care facility Home	0 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

New York-Northern New Jersey-Long Island, NY-NJ-PA: Bronx County, NY



Bronx County, NY: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	208
Drug-related suicide	4

Population1,364,566

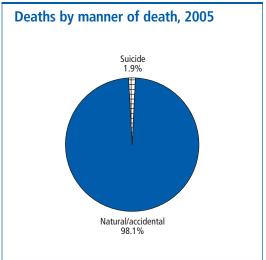
Deaths per 100,000 population

Drug-related	15.2
Drug-related suicide	0.3

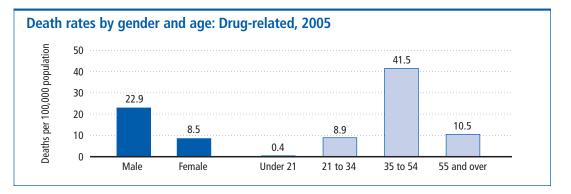
Drug-related deaths by drug category, 2004-2005

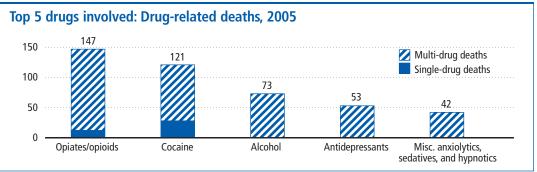
	[Orug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	228	208	40	6	4	
Alcohol*	62	73	0			
Cocaine	122	121	28		0	
Marijuana	0	5	0	0	0	
Stimulants	0	0	0	0	0	
Club drugs†	0		0	0	0	
Hallucinogens††			0	0	0	
Inhalants	6	4	0		0	
Antidepressants	36	53	0			
Antipsychotics	13	25	0	0		
Benzodiazepines	24	35	0			
Misc. anxiolytics, sedatives, and hypnotics	18	42	0		0	
Opiates/opioids	154	147	12			
Heroin (specified)	10	14		0	0	
Methadone	68	78	6		0	
All other opiates/opioids	100	97	4			
Nonsteroidal anti- inflammatory agents		0	0	0	0	
Salicylates/combinations	0		0	0	0	
Misc. analgesics/combinations	15	17	0			
Anticonvulsants			0	0	0	
Muscle relaxants	5	5	0	0		
Muscle relaxants	5	5	0	0		

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Death
Health care facility	80
Home	96
Public place	5
Other	19
Not documented	8 Doath:
Drug-related suicide	
Drug-related suicide Health care facility	Death:
Drug-related suicide	Death:
Drug-related suicide Health care facility Home Public place	Death:
Drug-related suicide Health care facility Home	Death:





NOTES: 1. Drug-related deaths exclude suicides.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

^{2.} All death rates are per 100,000 population.

^{3. --} A number less than 4 has been suppressed.

New York-Northern New Jersey-Long Island, NY-NJ-PA: Kings County, NY



Kings County, NY: Deaths and population, 2005

Diu	j-reialeu	100
Dru	g-related suicide	5
Popu	ation2.51	1.408

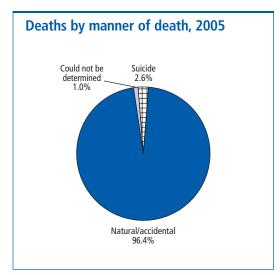
Deaths per 100,000 population

Drug-related	7.5
Drug-related suicide	0.2

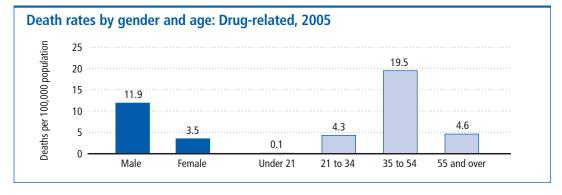
Drug-related deaths by drug category, 2004-2005

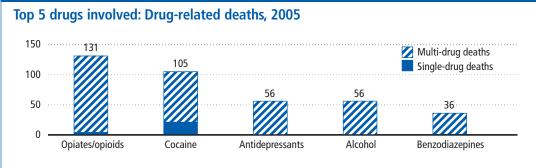
	0)rug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	199	188	27	9	5	
Alcohol*	50	56	0			
Cocaine	107	105	21		0	
Marijuana		4	0	0	0	
Stimulants	0	0	0	0	0	
Club drugs†		0	0	0	0	
Hallucinogens††	0		0	0	0	
Inhalants		9	0	0	0	
Antidepressants	34	56	0	5	4	
Antipsychotics	12	20	0			
Benzodiazepines	35	36				
Misc. anxiolytics, sedatives, and hypnotics	19	33				
Opiates/opioids	130	131	4	6		
Heroin (specified)			0	0	0	
Methadone	45	63	4			
All other opiates/opioids	95	99	0	4		
Nonsteroidal anti- inflammatory agents			0	0	0	
Salicylates/combinations	0	0	0	0	0	
Misc. analgesics/combinations	14	12	0			
Anticonvulsants	4	6	0		0	
Muscle relaxants			0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	65
Home	100
Public place	
Other	9
Not documented	11
Not documented	11
Not documented	11
Not documented Drug-related suicide Health care facility Home	11 Deaths 4
Not documented Drug-related suicide Health care facility Home Public place	11 Deaths 4
Not documented Drug-related suicide Health care facility Home Public place Other	11 Deaths 4





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

New York-Northern New Jersey-Long Island, NY-NJ-PA: New York County, NY



New York County, NY: Deaths and population, 2005

Deaths	reported	to	DAWN	
Drug	rolated			

Drug-relateu	202
Drug-related suicide	25
Population1,	606,275

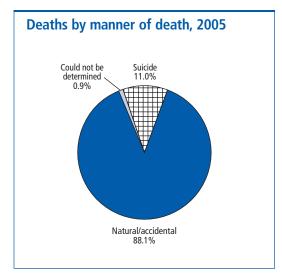
Deaths per 100,000 population

Drug-related	12.6
Drug-related suicide	1.6

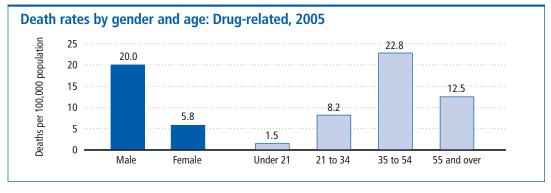
Drug-related deaths by drug category, 2004-2005

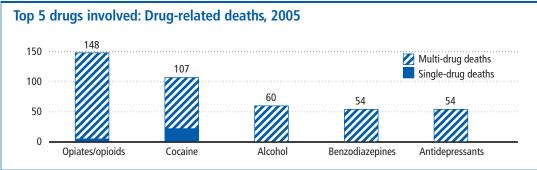
		Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	239	202	29	23	25	
Alcohol*	78	60	0	5	8	
Cocaine	133	107	22	5		
Marijuana		5	0		0	
Stimulants			0	0	0	
Club drugs†			0	0	0	
Hallucinogens††	5	0	0	0	0	
Inhalants	7		0			
Antidepressants	45	54	0	9	15	
Antipsychotics	9	14	0		6	
Benzodiazepines	47	54	0	8	9	
Misc. anxiolytics, sedatives, and hypnotics	32	37	0	6	6	
Opiates/opioids	157	148	5	7	12	
Heroin (specified)	23	15	0	0	0	
Methadone	53	67	4			
All other opiates/opioids	101	99		5	11	
Nonsteroidal anti- inflammatory agents	0		0	0	0	
Salicylates/combinations	0		0	0		
Misc. analgesics/combinations	15	24	0	5	5	
Anticonvulsants	4	4	0			
Muscle relaxants		7	0	0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	62
Home	107
Public place	11
Other	18
Not documented	4
Not documented	4
Not documented Drug-related suicide	4 Deaths 7
Not documented Drug-related suicide Health care facility Home	4 Deaths 7 13
Not documented Drug-related suicide Health care facility Home Public place	4 Deaths 7 13
Not documented Drug-related suicide Health care facility Home Public place	4 Deaths 7 13





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

New York-Northern New Jersey-Long Island, NY-NJ-PA: Queens County, NY



Queens County, NY: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	112
Drug-related suicide	7
Population	2,256,576

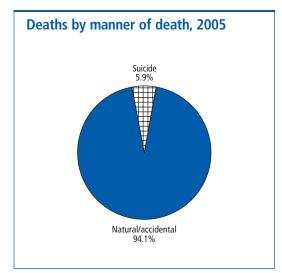
Deaths per 100,000 population

Drug-related	5.0
Drug-related suicide	0.3

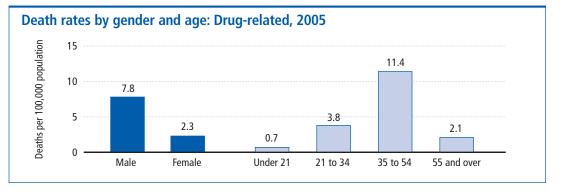
Drug-related deaths by drug category, 2004-2005

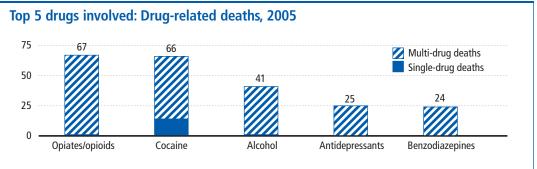
	[Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	134	112	18	12	7	
Alcohol*	33	41				
Cocaine	65	66	14	0		
Marijuana	9		0	0	0	
Stimulants	0		0	0	0	
Club drugs†			0	0	0	
Hallucinogens††			0		0	
Inhalants		10	0	0	0	
Antidepressants	28	25	0	4		
Antipsychotics	15	14				
Benzodiazepines	42	24	0		0	
Misc. anxiolytics, sedatives, and hypnotics	17	20	0	6		
Opiates/opioids	90	67		5		
Heroin (specified)	6		0	0	0	
Methadone	38	27		4	0	
All other opiates/opioids	62	53	0	4		
Nonsteroidal anti- inflammatory agents			0	0		
Salicylates/combinations	0		0	0	0	
Misc. analgesics/combinations	7	11	0	7		
Anticonvulsants	5	6	0		0	
Muscle relaxants	0	4	0			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	37
Home	67
Public place	0
Other	8
Not documented	0
	0 Deaths
Drug-related suicide	
Drug-related suicide Health care facility Home	Deaths 5
Drug-related suicide Health care facility Home Public place	Deaths 5
Drug-related suicide Health care facility Home Public place Other	Deaths 5





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

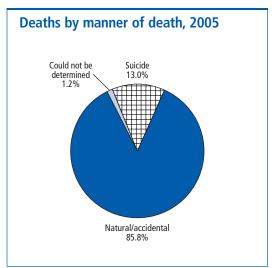
New York-Northern New Jersey-Long Island, NY-NJ-PA: Suffolk County, NY



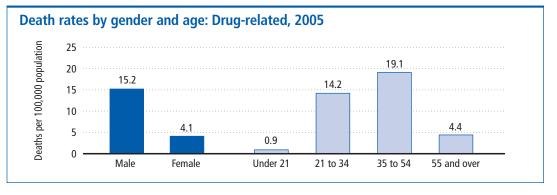
Drug-related deaths by drug category, 2004-2005

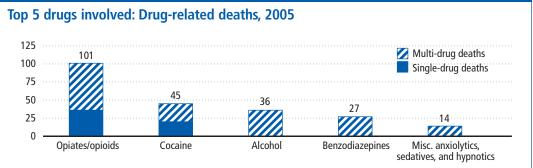
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	135	141	60	25	21	4
Alcohol*	34	36	0		5	0
Cocaine	59	45	20	0		0
Marijuana	6		0	0	0	0
Stimulants	0		0	0	0	0
Club drugs†				0	0	0
Hallucinogens††		0	0	0	0	0
Inhalants		0	0	0	0	0
Antidepressants	20	14	0	9	8	
Antipsychotics			0	7		0
Benzodiazepines	40	27	0	4	6	0
Misc. anxiolytics, sedatives, and hypnotics	16	14	0	5	6	
Opiates/opioids	102	101	36	13	10	
Heroin (specified)	33	45	20	0	0	0
Methadone	27	22	8	0		0
All other opiates/opioids	68	46	8	13	9	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0
Salicylates/combinations					0	0
Misc. analgesics/combinations	9	9		5	7	
Anticonvulsants	0				0	0
Muscle relaxants	11	9	0		5	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	11
Home	116
Public place	
Other	11
Not documented	0
Not documented Drug-related suicide	
Not documented	0
Not documented Drug-related suicide Health care facility Home	0
Not documented Drug-related suicide Health care facility Home Public place	0 Deaths 14
Not documented Drug-related suicide Health care facility Home	0 Deaths 14 4





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Philadelphia-Camden-Wilmington, PA-NJ-DE-MD: Delaware County, PA



Delaware County, PA: Deaths and population, 2005

Deaths reported to	DAWN
Drug-related	

Drug-relateu	
Drug-related suicide	6
Population	554,393

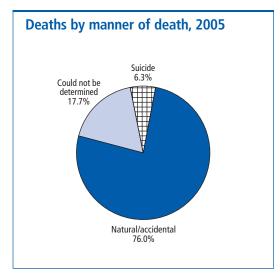
Deaths per 100,000 population

Drug-related	16.2
Drug-related suicide	1.1

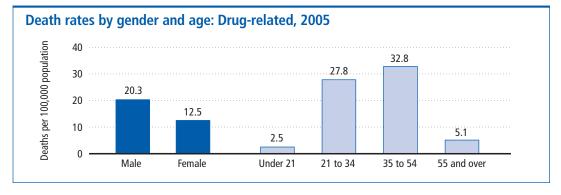
Drug-related deaths by drug category, 2004-2005

	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	69	90	7	13	6	0
Alcohol*	20	30	0			
Cocaine	29	44		0	0	•••••
Marijuana	4	10	0		0	
Stimulants			0	0	0	
Club drugs†				0	0	•••••
Hallucinogens††			0	0	0	•••••
Inhalants			0	0	0	• • • • • • • • • • • • • • • • • • • •
Antidepressants	14	17	0	7	6	
Antipsychotics	0		0			
Benzodiazepines	27	30	0	5	0	
Misc. anxiolytics, sedatives, and hypnotics	5	6	0			
Opiates/opioids	51	63		7		
Heroin (specified)		11	0	0	0	
Methadone	13	16			0	
All other opiates/opioids	41	45		7		
Nonsteroidal anti- inflammatory agents		4	0		0	
Salicylates/combinations	0	0	0		0	
Misc. analgesics/combinations	6		0	5	0	
Anticonvulsants	4	5	0	0	0	
Muscle relaxants	4	6	0		0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	27
Home	48
Public place	
Other	13
Not documented	0
Drug-related suicide	Deaths
	Deaths
Health care facility Home	
Health care facility Home Public place	 5 0
Public place Other	





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Philadelphia-Camden-Wilmington, PA-NJ-DE-MD: Philadelphia County, PA



Philadelphia County, PA: Deaths and population, 2005

Deaths	reported	to	DAWN
Drug-	rolated		

Drug-related	402
Drug-related suicide	22
Population	1,456,350

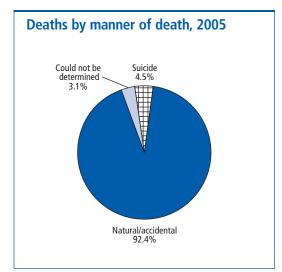
Deaths per 100,000 population

Drug-related	31.7
Drug-related suicide	1.5

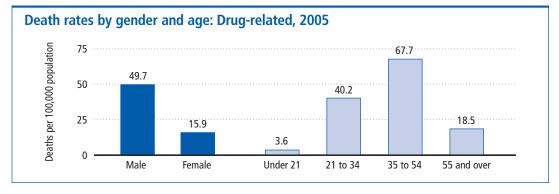
Drug-related deaths by drug category, 2004-2005

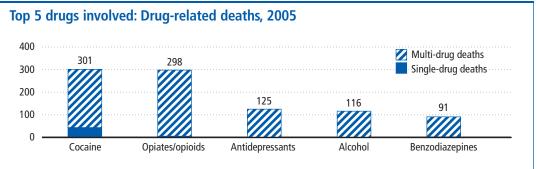
	[Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS		462	55		22	
Alcohol*		116	0			
Cocaine		301	43			
Marijuana		0	0		0	
Stimulants		14	0		0	
Club drugs†		4	0		0	
Hallucinogens††		15			0	
Inhalants		0	0			
Antidepressants		125	0		13	
Antipsychotics		50	0			
Benzodiazepines		91			8	
Misc. anxiolytics, sedatives, and hypnotics		74	0		8	
Opiates/opioids		298	5		11	
Heroin (specified)		98				
Methadone		89				
All other opiates/opioids		252			10	
Nonsteroidal anti- inflammatory agents		76	0			
Salicylates/combinations		0	0		0	
Misc. analgesics/combinations		14	0			
Anticonvulsants		45			4	
Muscle relaxants		27	0			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	158
Home	220
Public place	34
Other	47
Not documented	
not documented	
	Deaths
Drug-related suicide	Deaths 10
Drug-related suicide Health care facility Home	10 11
Drug-related suicide Health care facility Home Public place	10 11 0
Drug-related suicide Health care facility Home Public place	10 11 0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Portland-Vancouver-Beaverton, OR-WA: Multnomah County, OR



Multnomah County, OR: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	121
Drug-related suicide	23
Population	672,947

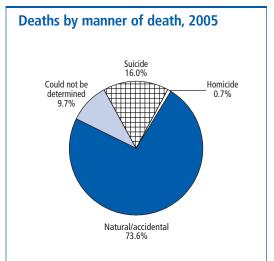
Deaths per 100,000 population

Drug-related	18.0
Drug-related suicide	3.4

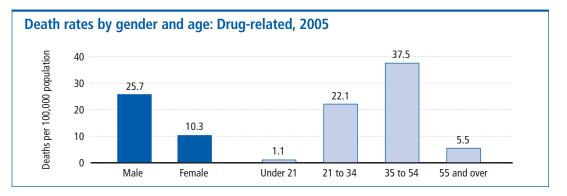
Drug-related deaths by drug category, 2004-2005

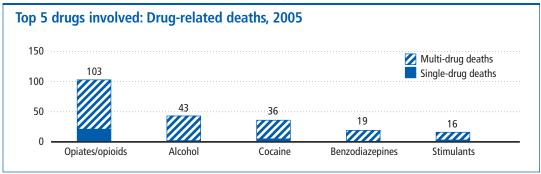
	[Orug-relate	d	Drug	j-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	121	121	33	18	23	
Alcohol*	49	43		8	8	
Cocaine	48	36	5	0	4	
Marijuana	11	9	0			
Stimulants	19	16			0	
Club drugs†		0	0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants		0	0	0	0	
Antidepressants	26	12	0	10	7	
Antipsychotics			0	4		
Benzodiazepines	25	19		4		
Misc. anxiolytics, sedatives, and hypnotics	10	9	0		5	
Opiates/opioids	103	103	21	7	14	
Heroin (specified)	57	41	12	0		
Methadone	27	33	8			
All other opiates/opioids	78	46		4	13	
Nonsteroidal anti- inflammatory agents	0		0	0		
Salicylates/combinations	0	0	0		0	
Misc. analgesics/combinations						
Anticonvulsants			0			
Muscle relaxants			0			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	18
Home	68
Public place	18
Other	17
Not documented	0
Not documented	0 Deaths
Not documented Drug-related suicide	
Not documented Drug-related suicide Health care facility Home	Deaths 15
Not documented Drug-related suicide Health care facility Home Public place	Deaths 15
Not documented Drug-related suicide Health care facility Home Public place	Deaths 15





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Provo-Orem, UT: Utah County, UT



Utah County, UT: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related	71
Drug-related suicide	6
Population	.451,855

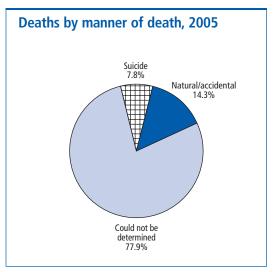
Deaths per 100,000 population

Drug-related	15.7
Drug-related suicide	1.3

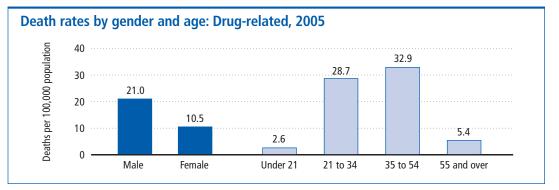
Drug-related deaths by drug category, 2004-2005

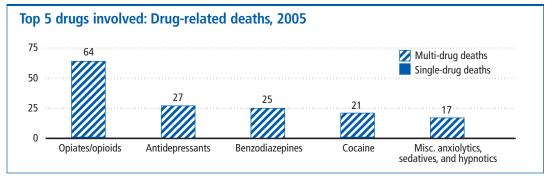
	[Orug-relate	d	Drug	-related su	icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	52	71			6	0
Alcohol*	11	5				
Cocaine	18	21			0	•••••
Marijuana	8	12				•••••
Stimulants	7	8				•••••
Club drugs†	0	0			0	•••••
Hallucinogens††	0	0			0	
Inhalants	0	0			0	
Antidepressants	21	27				•
Antipsychotics		7			0	•••••
Benzodiazepines	16	25				•••••
Misc. anxiolytics, sedatives, and hypnotics	10	17				
Opiates/opioids	48	64				
Heroin (specified)	10					•••••
Methadone	16	20			0	•••••
All other opiates/opioids	37	53				•••••
Nonsteroidal anti- inflammatory agents	0	0			0	
Salicylates/combinations	0	0			0	
Misc. analgesics/combinations		8			0	
Anticonvulsants	4	7			4	
Muscle relaxants	5	10			0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	31
Home	37
Public place	0
Other	
Not documented	0
Drug-related suicide	Deaths
	Deaths
Health care facility Home	
Health care facility Home Public place	
Drug-related suicide Health care facility Home Public place Other	 0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Salt Lake City, UT: Salt Lake County, UT

Drug-related



Salt Lake County, UT: Deaths and population, 2005

Deaths reported to DAWN

Drug relateumminninn	
Drug-related suicide	24
Population	960,297

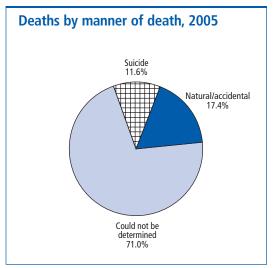
Deaths per 100,000 population

Drug-related	19.1
Drug-related suicide	2.5

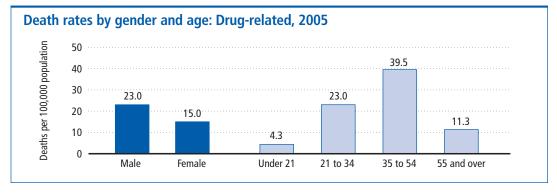
Drug-related deaths by drug category, 2004-2005

)rug-relate	d	Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	160	183	8	28	24	0
Alcohol*	43	35	0		5	
Cocaine	54	59				
Marijuana	12	27	0	0		
Stimulants	36	27	0			
Club drugs†			0	0	0	
Hallucinogens††	0	0	0	0	0	
Inhalants			0	0	0	
Antidepressants	59	79	0	17	18	
Antipsychotics	5	17	0	7	5	
Benzodiazepines	45	62	0	5	9	
Misc. anxiolytics, sedatives, and hypnotics	44	55	0	14	7	
Opiates/opioids	138	165	7	12	15	•••••••••
Heroin (specified)	17	14	0	0	0	
Methadone	48	53				
All other opiates/opioids	102	135	5	10	13	
Nonsteroidal anti- inflammatory agents			0			
Salicylates/combinations	0	0	0	0		
Misc. analgesics/combinations	19	24	0	6	11	
Anticonvulsants	11	17	0			••••••
Muscle relaxants	13	28	0			

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	46
Home	119
Public place	7
Other	11
Not documented	0
	Deaths
Not documented Drug-related suicide Health care facility	Deaths 5
Drug-related suicide Health care facility Home	5 15
Drug-related suicide Health care facility Home Public place	5 15
Drug-related suicide Health care facility Home Public place	5 15





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

San Francisco-Oakland-Fremont, CA: San Mateo County, CA



San Mateo County, CA: Deaths and population, 2005

Deaths reported	to	DAWN	
Drug-related			

Drug relateumminimminimminim	, ,
Drug-related suicide	23
Population	701.175

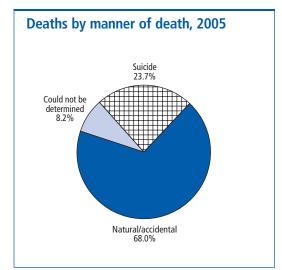
Deaths per 100,000 population

Drug-related	10.6
Drug-related suicide	3.3

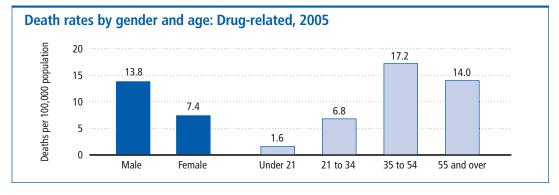
Drug-related deaths by drug category, 2004-2005

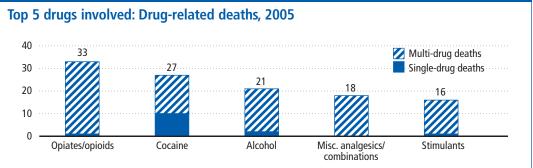
		Orug-relate	ed Drug-related suici			icide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	82	74	15	13	23	4
Alcohol*	20	21				0
Cocaine	17	27	10			
Marijuana			0	0	0	0
Stimulants	22	16			4	0
Club drugs†	0	0	0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants		0	0		0	0
Antidepressants	20	15	0	5	11	
Antipsychotics	5		0		5	
Benzodiazepines	13	11	0	5	4	0
Misc. anxiolytics, sedatives, and hypnotics	15	11	0	4	7	0
Opiates/opioids	41	33		5	10	0
Heroin (specified)		0	0		0	0
Methadone	6	8		0		0
All other opiates/opioids	38	27	0	5	10	0
Nonsteroidal anti- inflammatory agents	0		0	0		0
Salicylates/combinations	0	0	0	0	0	0
Misc. analgesics/combinations	15	18	0		6	0
Anticonvulsants	8	6	0			
Muscle relaxants	7	4	0	0		0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	13
Home	42
Public place	14
Other	5
Not documented	0
Drug-related suicide	Deaths
Health care facility	5
Home	12
	4
Public place	
Public place Other	





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Seattle-Tacoma-Bellevue, WA: King County, WA



King County, WA: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	301
Drug-related suicide	51
Population	1 700 110

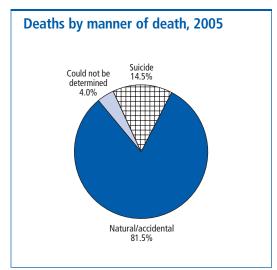
Deaths per 100,000 population

Drug-related.		 	16.7
Drug-related	suicide	 	. 2.8

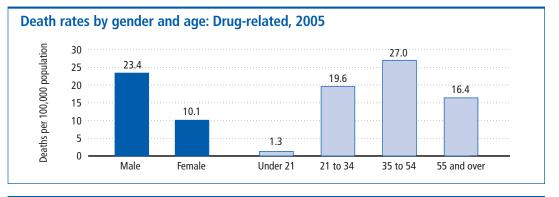
Drug-related deaths by drug category, 2004-2005

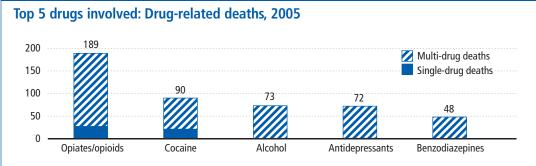
	[Orug-relate	d	Drug	j-related su	iicide
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	299	301	101	42	51	14
Alcohol*	75	73	0	11	16	0
Cocaine	99	90	21		6	
Marijuana	5	8	0	0		0
Stimulants	25	31	13	0	5	5
Club drugs†		5	0	0	0	0
Hallucinogens††			0	0	0	0
Inhalants			0			
Antidepressants	68	72		21	21	0
Antipsychotics	6	5	0			
Benzodiazepines	37	48	0	8	11	0
Misc. anxiolytics, sedatives, and hypnotics	32	30	0	13	11	
Opiates/opioids	179	189	27	11	20	
Heroin (specified)	42	64	14			
Methadone	67	84	10		5	0
All other opiates/opioids	96	78		9	14	
Nonsteroidal anti- inflammatory agents	0					0
Salicylates/combinations		4		4		
Misc. analgesics/combinations	12	7	0	6	5	0
Anticonvulsants	16	15	0	4	6	0
Muscle relaxants	11	13	0	0		0

- * Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.
- † Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.
- †† Includes PCP, LSD, and miscellaneous hallucinogens.



Drug-related	Deaths
Health care facility	93
Home	132
Public place	40
Other	36
Not documented	0
Drug-related suicide	Deaths
Health care facility	6
Home	33
Public place	6
Other	6
Not documented	0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

Seattle-Tacoma-Bellevue, WA: Snohomish County, WA



Snohomish County, WA: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related63	
Drug-related suicide9	
Population655,564	

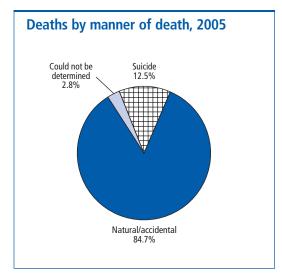
Deaths per 100,000 population

Drug-related	9.6
Drug-related suicide	1.4

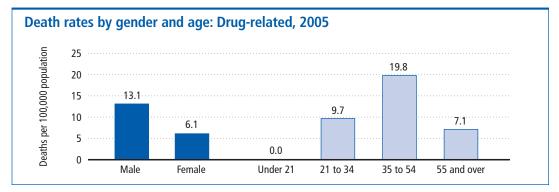
Drug-related deaths by drug category, 2004-2005

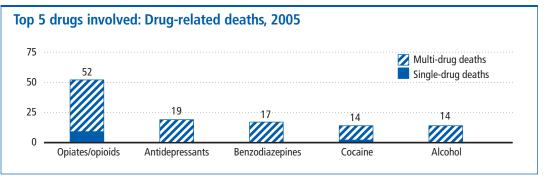
Drug-related			Drug-related suicide			
Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
78	63	14	10	9		
14	14	0	4			
17	14			0		
0	0	0		0		
6	5					
0	0	0	0	0		
0	0	0	0	0		
	0	0	0	0		
33	19	0	6	6		
		0	0	0		
23	17	0		0		
11	13	0				
62	52	9	7	5		
			0	0		
33	30			0		
36	30	5	7	5		
		0		0		
0	0	0	0	0		
10	4			0		
7	6	0				
8	7	0				
	Deaths, 2004 78 14 17 0 6 0 33 23 11 62 33 36 0 10 7	Deaths, 2004 Deaths, 2005 78 63 14 14 17 14 0 0 6 5 0 0 0 33 19 23 17 11 13 62 52 33 30 36 30 0 0 10 4 7 6	Deaths, 2004 Deaths, 2005 Single-drug deaths, 2005 78 63 14 14 14 0 17 14 0 0 0 6 5 0 0 0 0 0 33 19 0 0 0 23 17 0 11 13 0 62 52 9 33 30 33 30 5 0 0 0 0 10 4 7 6 0	Deaths, 2004 Deaths, 2005 Single-drug deaths, 2004 Deaths, 2005 78 63 14 10 14 14 0 4 17 14 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 33 19 0 6 0 0 23 17 0 11 13 0 62 52 9 7 0 33 30 36 30 5 7 0 0 0 0 36 30 5 7 0 0 0	Deaths, 2004 Deaths, 2005 Single-drug deaths, 2004 Deaths, 2005 Deaths, 2005 78 63 14 10 9 14 14 0 4 17 14 0 6 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 33 19 0 6 6 0 0 0 23 17 0 0 11 13 0 62 52 9 7 5 0 0 0 33 30 0 36 30 5 7 5 0 0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	10
Home	42
Public place	5
Other	6
Not documented	0
Drug-related suicide	Deaths
Health care facility	0
Health care facility Home	0
Health care facility Home Public place	0 8
Home Public place	0 8





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Springfield, MA: Hampden County, MA



Hampden County, MA: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	64
Drug-related suicide	12
Population	460,828

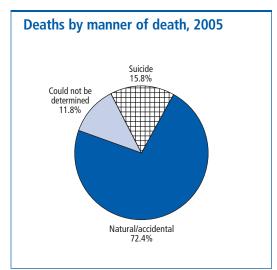
Deaths per 100,000 population

Drug-related	13.9
Drug-related suicide	2.6

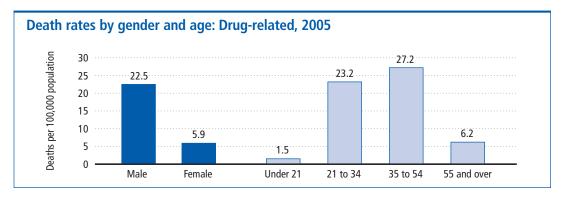
Drug-related deaths by drug category, 2004-2005

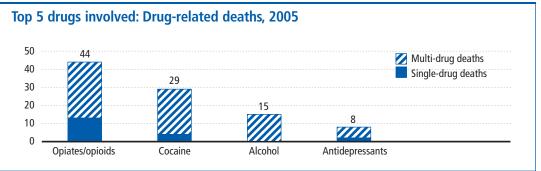
	Drug-related			Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
ALL DRUGS		64	25		12	4	
Alcohol*		15	0		4	0	
Cocaine		29	4				
Marijuana		0	0		0	0	
Stimulants		0	0		0	0	
Club drugs†		0	0		0	0	
Hallucinogens††		0	0		0	0	
Inhalants					0	0	
Antidepressants		8				0	
Antipsychotics						0	
Benzodiazepines			0			0	
Misc. anxiolytics, sedatives, and hypnotics			0			0	
Opiates/opioids		44	13				
Heroin (specified)		8				0	
Methadone		7			0	0	
All other opiates/opioids		33	8				
Nonsteroidal anti- inflammatory agents		0	0		0	0	
Salicylates/combinations					0	0	
Misc. analgesics/combinations			0		0	0	
Anticonvulsants			0		0	0	
Muscle relaxants			0		0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	26
Home	32
Public place	
Other	==
Not documented	0
	0 Deaths
Drug-related suicide	0 Deaths
Drug-related suicide Health care facility Home	
Drug-related suicide Health care facility Home Public place	 8 0
Drug-related suicide Health care facility Home Public place	8 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

St. Louis, MO-IL: St. Louis City, MO



St. Louis City, MO: Deaths and population, 2005

Deaths reported to DAWN	
Drug-related81	
Drug-related suicide8	
Population352,572	

23.0

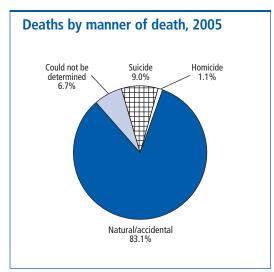
Deaths per 100,000 population Drug-related.....

	-	Drug-related suicide2.3
ς.		3

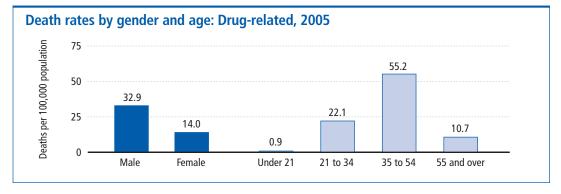
Drug-related deaths by drug category, 2004-2005

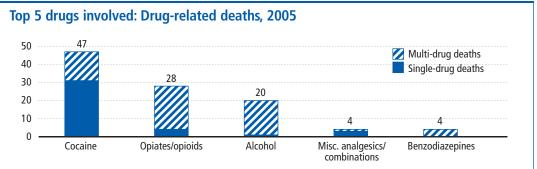
	Drug-related			Drug-related suicide			
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
ALL DRUGS	74	81	42	8	8	6	
Alcohol*	26	20		4	0	0	
Cocaine	37	47	31		0	0	
Marijuana		0	0	0	0	0	
Stimulants			0	0	0	0	
Club drugs†	0	0	0	0	0	0	
Hallucinogens††	0	0	0	0	0	0	
Inhalants	0	0	0	0	0	0	
Antidepressants		4					
Antipsychotics		4	0			0	
Benzodiazepines	8	4	0			0	
Misc. anxiolytics, sedatives, and hypnotics	0	0	0	0			
Opiates/opioids	40	28	4	4		0	
Heroin (specified)	24	7	0	0	0	0	
Methadone		6		0	0	0	
All other opiates/opioids	39	23		4		0	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0	
Salicylates/combinations		0	0	0	0	0	
Misc. analgesics/combinations	5	4					
Anticonvulsants		0	0	0	0	0	
Muscle relaxants	0	0	0		0	0	

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	31
Home	33
Public place	
Other	15
Not documented	0
Not documented Drug-related suicide Health care facility	0 Deaths
Drug-related suicide Health care facility Home	Deaths
Drug-related suicide Health care facility Home Public place	Deaths 0
Drug-related suicide Health care facility Home	Deaths 0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

St. Louis, MO-IL: St. Louis County, MO



St. Louis County, MO: Deaths and population, 2005

Deaths reported to DAWN

Drug-related	88
Drug-related suicide	21
Population	1,002,258

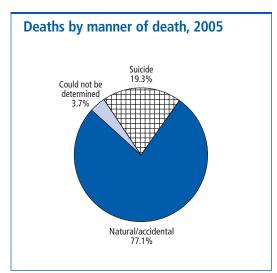
Deaths per 100,000 population

Drug-related	8.8
Drug-related suicide	2.1

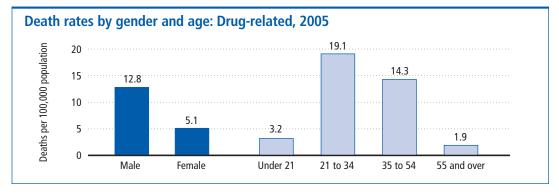
Drug-related deaths by drug category, 2004-2005

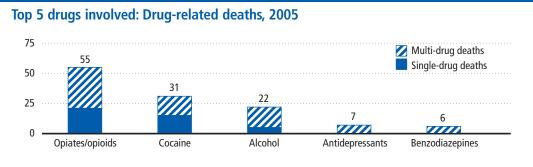
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	85	88	47	23	21	14
Alcohol*	34	22	5	9		0
Cocaine	26	31	15	4		
Marijuana	0		0	0	0	0
Stimulants	4			0	0	0
Club drugs†	0	0	0	0	0	0
Hallucinogens††	0	0	0	0	0	0
Inhalants				0	0	0
Antidepressants	6	7	0	7	6	4
Antipsychotics	0		0		5	
Benzodiazepines	7	6	0			
Misc. anxiolytics, sedatives, and hypnotics			0			
Opiates/opioids	54	55	21	6	4	
Heroin (specified)	25	21	10	0		0
Methadone	5	11				0
All other opiates/opioids	27	30	8	5		
Nonsteroidal anti- inflammatory agents		0	0	0	0	0
Salicylates/combinations		0	0			0
Misc. analgesics/combinations		0	0	5		0
Anticonvulsants	0	0	0			0
Muscle relaxants		4	0	0	0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	38
Home	37
Public place	8
Other	4
Not documented	
Drug-related suicide	Deaths
	Deaths 11
Health care facility Home	11
Health care facility Home Public place	11 8
Public place Other	11



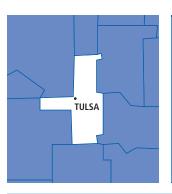


- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Tulsa, OK: Tulsa County, OK



Tulsa County, OK: Deaths and population, 2005

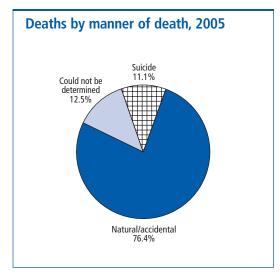
Deaths reported to DAWN	
Drug-related	64
Drug-related suicide	8
Population	570,627
Deaths per 100,000 population	

Drug-related suicide......1.4

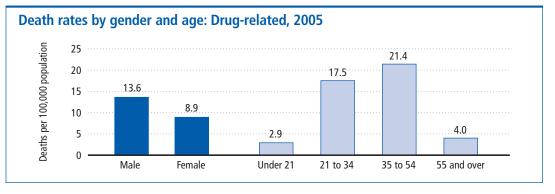
Drug-related deaths by drug category, 2004-2005

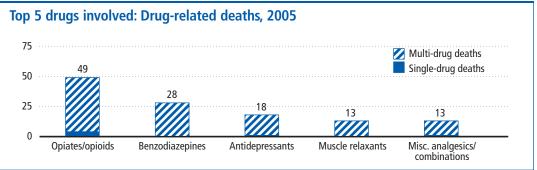
		Orug-relate	d	Drug-related si		uicide	
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	
ALL DRUGS		64	10		8	0	
Alcohol*		7	0		4		
Cocaine		6				•••••	
Marijuana		0	0		0		
Stimulants		10					
Club drugs†		0	0		0		
Hallucinogens††		0	0		0		
Inhalants		0	0		0		
Antidepressants		18			4		
Antipsychotics			0		0		
Benzodiazepines		28	0		4		
Misc. anxiolytics, sedatives, and hypnotics		8	0				
Opiates/opioids		49	4		4		
Heroin (specified)		0	0		0		
Methadone		23					
All other opiates/opioids		29					
Nonsteroidal anti- inflammatory agents		0	0		0		
Salicylates/combinations			0		0		
Misc. analgesics/combinations		13					
Anticonvulsants		4	0		0		
Muscle relaxants		13	0				

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Health care facility	17
Home	41
Public place	
Other	
Not documented	0
Drug-related suicide	Deaths
Health care facility	
	7
Home	•
Home Public place	0
	0





NOTES: 1. Drug-related deaths exclude suicides.

2. All death rates are per 100,000 population.

3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

Washington-Arlington-Alexandria, DC-VA-MD-WV: District of Columbia



District of Columbia: Deaths and population, 2005

Deaths	reported	to	DAWN
--------	----------	----	------

Population	582.049
Drug-related suicide	10
Drug-related	125

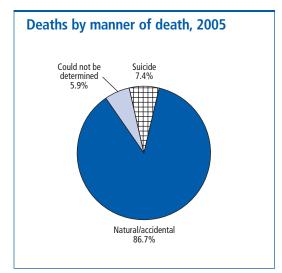
Deaths per 100,000 population

Drug-related	21.5
Drug-related suicide	1.7

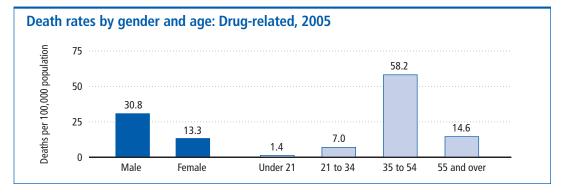
Drug-related deaths by drug category, 2004-2005

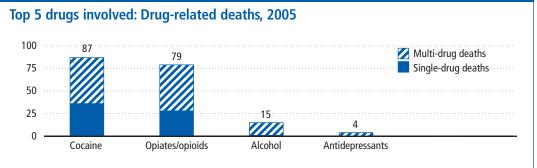
	Drug-related			Drug-related suicide		
Drug category	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005	Deaths, 2004	Deaths, 2005	Single- drug deaths, 2005
ALL DRUGS	96	125	67	9	10	5
Alcohol*	14	15		0		0
Cocaine	59	87	36		0	0
Marijuana	0	0	0	0	0	0
Stimulants	0			0	0	0
Club drugs†	0	0	0	0	0	0
Hallucinogens††			0			0
Inhalants	0	0	0	0		0
Antidepressants	5	4	0	0	4	
Antipsychotics					0	0
Benzodiazepines	4		0	0		0
Misc. anxiolytics, sedatives, and hypnotics	0	0	0			
Opiates/opioids	67	79	28	5	4	
Heroin (specified)	5	4	0	0	0	0
Methadone	10	18	6		0	0
All other opiates/opioids	60	63	22		4	
Nonsteroidal anti- inflammatory agents	0	0	0	0	0	0
Salicylates/combinations	0	0	0	0	0	0
Misc. analgesics/combinations	0	0	0	0	0	0
Anticonvulsants	0	0	0	0	0	0
Muscle relaxants	0	0	0	0	0	0

^{*} Includes alcohol in combination with other drugs (all ages) and alcohol alone in decedents under age 21.



Drug-related	Deaths
Place of death, 2005 Drug-related Health care facility Home Public place Other Not documented Drug-related suicide Health care facility Home	41
	57
Public place	12
Other	14
Not documented	
	 Deaths
Drug-related suicide	Deaths
Drug-related suicide Health care facility Home	
Drug-related suicide Health care facility Home Public place	 8
Drug-related suicide Health care facility Home Public place	 8 0





- NOTES: 1. Drug-related deaths exclude suicides.
 - 2. All death rates are per 100,000 population.
 - 3. -- A number less than 4 has been suppressed.

[†] Includes MDMA (Ecstasy), GHB, flunitrazepam (Rohypnol), and ketamine.

^{††} Includes PCP, LSD, and miscellaneous hallucinogens.

APPENDIX A

DAWN MORTALITY DATA COLLECTION

DAWN data collection

DAWN mortality data are collected in participating medical examiner and coroner (ME/C) offices through a retrospective review of case records for every death investigated by the ME/C. Families are never interviewed. The review of source records is performed by a trained DAWN reporter in each member facility. Depending on the needs of the facility, the DAWN reporter may be an employee of the death investigation jurisdiction or an employee of the DAWN operations contractor.

Within each facility that participates in DAWN, the designated DAWN reporter reviews all death records to identify deaths related to drug use. The DAWN reporter submits an electronic case report to the DAWN system for each death that meets the specific case selection criteria.

Deaths eligible for DAWN

A DAWN case is any death related to recent drug use. DAWN includes deaths associated with substance abuse and misuse, both intentional and accidental. This includes the use of drugs for legitimate therapeutic purposes. To be a DAWN case, the relation between the death and the drug need not be causal; the drug needs only to be implicated in the death. Only recent drug use is included, and the reason that a patient used a drug is irrelevant.

The case criteria are intended to be broad and inclusive and to have few exceptions. Broad criteria take into account the fact that documentation in death records varies in clarity and comprehensiveness across ME/Cs. Broad criteria minimize the potential for judgments that could cause data to vary systematically and unexpectedly across reporters and jurisdictions. In addition, broad criteria are designed to capture a very diverse set of drug-related deaths, which can be aggregated and disaggregated to serve a variety of analytical purposes and the interests of multiple audiences.

There are some clearly delineated exceptions to the DAWN case criteria. A death is not a DAWN case if:

- There was no evidence of recent drug use.
- The death was not processed by an ME/C.
- The decedent was a drug user but died of natural causes unrelated to the drug use.
- The decedent was a homicide victim, but the method of homicide was not poisoning by drugs.
- The decedent consumed a nonpharmaceutical substance but did not inhale it.
- The death involved inhalation of carbon monoxide and no other reportable substance.
- The decedent had a history of drug use but no recent use.
- Alcohol was the only substance involved, and the decedent was an adult (age 21 or over).
- The only documentation of drug involvement was in toxicology test results.

- The only drugs listed (e.g., current medications) were not related to the death.
- The death was a consequence of undermedication (taking too little of a drug).

Data items collected by DAWN

The case report form showing all the data items collected by DAWN is provided in Figure A-1. This is a representation of the form on paper, whereas all DAWN data are submitted electronically. The electronic system, for example, permits the submission of more drugs than are shown on the paper form.

Manner of death in DAWN

Manner of death is a particularly important part of the death records because it is used to determine if the death is a case of drug misuse or abuse. As depicted in Figure A-2, DAWN decision tree, each death is assigned to one of seven manners of death, as follows:

- Suicide,
- Homicide by drugs,
- Adverse reaction to medication,
- Overmedication,
- Accidental ingestion,
- All other accidental, and
- Could not be determined.

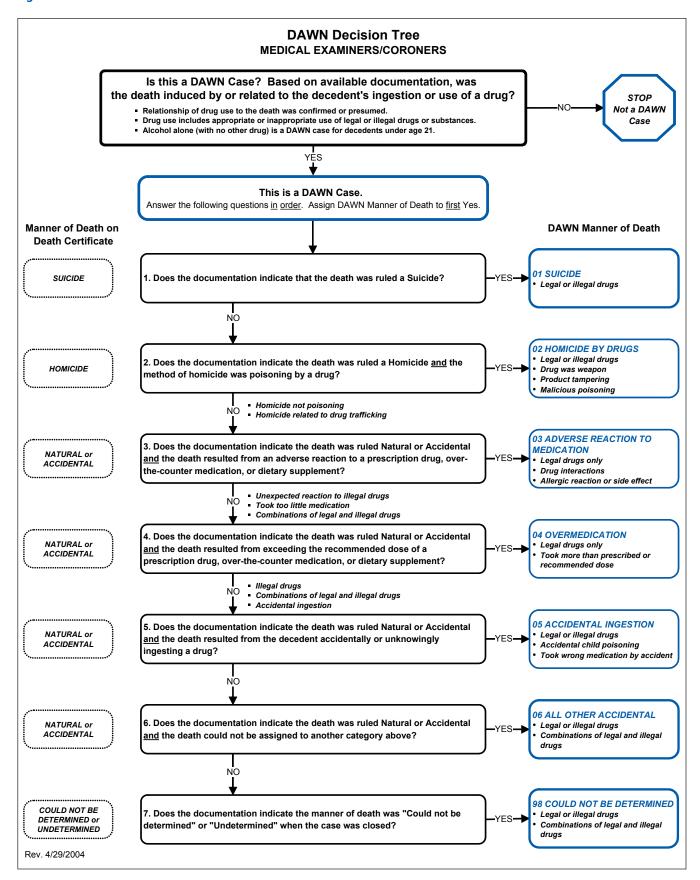
Each DAWN case is assigned to one, and only one, of the seven manner of death categories based on the series of questions and decision rules depicted in the decision tree. Starting at the top, each case is assigned to the first manner of death that applies, even if the case might also meet the rules for a subsequent category. The seven categories were ordered with this in mind.

The final two categories, "All other accidental" and "Could not be determined," were designed to capture all of the drug-related deaths that could not be classified in any of the prior case types. "Could not be determined" cases include those that are ruled by the ME/C explicitly as "could not be determined" (i.e., the evidence was inconclusive with regard to whether the death was accidental, suicide, or homicide).

Figure A-1. DAWN case form

	SAMHS M NUM		ONLY			De	epartn			Human Services Substa 1g Abuse Warn Medical Exam	ing N	letwork	(DAWN)	lminis	tratio	n			OMB. N	M APPROVEI D. 0930-007 5 12/31/200!
1.	Facil	lity IC] 2	2. Cross-reference (for facility use only	<i>ı</i>)									
_										INFORMATIO	N ON D	ECEASED								
3.	Date	of D	eath	DAY		2	УЕАІ		4	4. Sex 1 ☐ Male 2 ☐ Female 8 ☐ Not documen	ted		5. Age	e		- 1			n 1 ye cumen	
6.	Othe	erwis No fi	e, ma xed a hom tution	ark [x] addre eless (e.g tal)	l one			01 L 02 [] 03	Emer Othe Deco Publ	ne: rgency department er health care facility edent's home ic place	8.	ZIP Code for	Place of Death umented		9.	Mark	White lack of lispar sian meri laska lative Other	ne or or Afr nic or can Ir Nativ Haw Pacifi	Latino ndian o	r
10.	Chec	ck all Death Toxico Autor Exteri Inspe	that n cert ology osy nal pl ction ment	apply ificat lab nysica of so of pl	y: e repor al sig ene hysic	rt ns of de	ath	termi. atic	on		11.						ng th	e dea	ith.	
12. Manner of Death Mark [x] one: o1 □ Suicide o2 □ Homicide by drugs o3 □ Adverse reaction to medication o4 □ Overmedication o5 □ Accidental ingestion o6 □ All other accidental 98 □ Could not be determined					o on al	ed	13. Drug Involvement in Death Mark [x] one: 1 Drug-induced: drug(s) directly caused the death 2 Drug-related: drug(s) contributed to the death If drug-related, mark one: 1 confirmed 2 presumed				As a result of As a result or (Part II) Other significant conditions:									
	cont nam sam	tribut ne pre e sub	ed to eferre	the d ov	deat er ge	h. Re neric	cord s	ubstances e preferred ames.	as sp over	ition, list all substances ecifically as possible (i. chemical name, etc.).	e., bran	d [trade]	Mark [x] if confirmed by		rcle	In ini ne:	strati	sitted snifted	snotted that	documente
	IHSA US	SE ONLY						วนถรเสทด	e (16C	ord verbatim)			toxicology test			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	·/ ¬			•
1														1	2	3	4	5	8	
2														1	2	3	4	5	8	
3														1	2	3	4	5	8	
4														1	2	3	4	5	8	
5														1	2	3	4	5	8	
														1	2	3	4	5	8	
6																			-	
6 7	С	2	0	0	0	2	9			ed? 1 ☐ Yes 2 ☐ No 8	_			1	2	3		5	8	

Figure A-2. DAWN decision tree



Drugs included in DAWN

DAWN includes all types of drugs. 1 Drugs in DAWN include:

- Illegal drugs, such as heroin, cocaine, marijuana, and Ecstasy;
- Prescription drugs, such as Prozac[®], Vicodin[®], OxyContin[®], alprazolam, and methylphenidate;
- Over-the-counter (OTC) medications, including aspirin, acetaminophen, ibuprofen, and multi-ingredient cough and cold remedies;
- Dietary supplements, including vitamins, herbal remedies, and nutritional products;
- Psychoactive, nonpharmaceutical inhalants;
- Alcohol in combination with other drugs; and
- Alcohol alone, in patients aged less than 21 years.

To be reportable, a nonpharmaceutical substance must be consumed by inhalation, sniffing, or snorting, and it must have a psychoactive effect when inhaled. A death involving inhalation of a nonpharmaceutical, psychoactive substance and no other drug qualifies as a DAWN case. Carbon monoxide is excluded from the inhalants, as noted above. Deaths involving accidental exposures (e.g., exposure to paint fumes while painting a closet) are excluded as well.

DAWN features that enhance data quality and reliability

Several methods are used to improve the quality and reliability of DAWN data. These include:

- Case finding by a retrospective review of death records for every death investigated by a participating ME/C;
- Electronic reporting with automated prompts and data validation;
- Elimination of incidental drug reporting;
- Accurate, specific, and nonredundant drug reporting;
- Inclusion of data items to identify drugs confirmed by laboratory testing;
- Rigorous training and certification of DAWN reporters; and
- In-house review and cleaning of DAWN case reports.

Participation of medical examiners and coroners

ME/Cs participate in DAWN on a voluntary basis and constitute neither a sample nor a census of ME/Cs in the United States. ME/Cs are invited to join DAWN based on their location in selected metropolitan areas. Recruitment efforts focus primarily on areas where DAWN data are also collected from hospital emergency departments. In addition to recruitment targeted at metropolitan areas, DAWN has added States with centralized ME/C systems to gain a better understanding of drug-related mortality outside of the targeted metropolitan areas.

In this publication, the terms "death investigation jurisdiction" (or, simply, "jurisdiction") and "county" are used

¹ The classification of drugs used in DAWN is derived from the Multum Lexicon, © 2008, Multum Information Services, Inc. The classification schema was modified to meet DAWN's unique requirements. The Multum Licensing Agreement governing use of the Lexicon is provided in Appendix C and can be found on the Internet at http://www.multum.com.

interchangeably because ME/Cs' offices are typically organized by county. One exception occurs in Niagara County, NY, which is divided into four districts. For reporting purposes, the four districts that make up Niagara County, NY, are treated collectively as a single jurisdiction. For participating states, every county or jurisdiction within each state is included in DAWN.

The metropolitan area definitions used in this publication are those established by the Office of Management and Budget (OMB) based on the 2000 U.S. Census as updated in 2003.² OMB issues annual updates to the boundaries and names of metropolitan areas. DAWN ME reports use the name that was current during the data collection year. While there have been several name changes, changes in metropolitan statistical area boundaries since 2003 have not altered the metropolitan areas reported on in this publication.

² Office of Management and Budget, Revised Definitions of Metropolitan Statistical Areas, New Definitions of Micropolitan Statistical Areas and Combined Statistical Areas, and Guidance on Uses of the Statistical Definitions of These Areas, Bulletin No. 03-04, June 6, 2003. (Available at http://www.whitehouse.gov/omb/bulletins/b03-04.html.)

APPENDIX B

GLOSSARY OF TERMS

This glossary defines terms used in data collection activities, analyses, and publications associated with the mortality component of DAWN.

Accidental ingestion: This category includes deaths resulting from accidentally or unknowingly ingesting a drug, as denoted by a medical examiner or coroner (ME/C).

Adverse reaction to medication: This category was designed to capture natural or accidental deaths as the result of an adverse reaction to a prescription drug, over-the-counter (OTC) medication, or dietary supplement.

All other accidental: See Drug misuse/abuse.

Body systems: Refers to neurological, cardiovascular, gastrointestinal, genitourinary, respiratory, musculoskeletal, skin and soft tissue, lymphatic, endocrine, head and neck, abdominal, or multisystem conditions identified in the chain of events that led to the drug-related death. (See also **Cause of death**.)

Case type: See Manner of death.

Cause of death: The chain of events (diseases, injuries, or complications) that caused the death, as recorded on the death certificate. A death can have multiple causes. The immediate cause is listed first and is followed by contributing causes listed sequentially, ending with the underlying cause. Other significant conditions that contributed to the death are listed separately.

Coroner (C): Death investigation jurisdictions typically use either a medical examiner (ME) system or a coroner system.

Unlike MEs, coroners need not be physicians; usually, the only prerequisite for serving as a coroner is that the individual be more than 18 years of age and a resident of the county or district to be served. Coroners are typically elected rather than appointed. They may have jurisdiction over counties or districts within States. (See also Jurisdiction and Medical examiner.)

Could not be determined: See Drug misuse/abuse.

Drug: This refers to a substance that was recorded in a DAWN case report. Substances accepted by DAWN include alcohol, illicit drugs, prescription and OTC pharmaceuticals, dietary supplements, and nonpharmaceutical inhalants. Multiple substances ("drugs") can be reported for each DAWN case. Therefore, the total number of drugs exceeds the total number of DAWN cases reported. (See also **Single-drug case**.)

Drug category: A generic grouping of related pharmaceuticals or other substances reported to DAWN, based on the classification of Multum Information Services. Multum, a subsidiary of the Cerner Corporation, is a developer of clinical drug information systems and a drug knowledge base. (More information is available at http://www.multum.com/.) In general, the Multum categories follow the therapeutic uses for prescription and OTC pharmaceuticals.

Additional clarification is provided for the following drug categories:

- Alcohol alone—DAWN collects data on alcohol when used alone only if the decedent is under age 21.
- Alcohol-in-combination—"Alcohol-in-combination" is the category for alcohol present in combination with another reportable substance (or substances). DAWN does not gather data on alcohol used alone if the decedent is over age 21. For decedents 21 or older, alcohol must be used with another substance to be reported. "Alcohol-in-combination" is reportable for all ages.
- Stimulants—This category includes amphetamines and methamphetamine. Since some drug screens test for amphetamines only as a class, an amphetamine-positive result could indicate amphetamine or methamphetamine. For this reason, amphetamines and methamphetamine are combined for analysis into the category "stimulants." This category does not include other central nervous system stimulants, such as caffeine or methylphenidate.
- Inhalants—This category includes anesthetic gases and psychoactive nonpharmaceutical substances for which the documented route of administration was inhaled, sniffed, or snorted. Accidental exposures to nonpharmaceutical inhalants (e.g., being overcome by paint fumes while painting a closet) are no longer included as DAWN cases. Psychoactive nonpharmaceuticals fall into one of the following three categories: (1) volatile solvents—adhesives (model airplane glue, rubber cement, household glue), aerosols (spray paint, hairspray, air freshener, deodorant, fabric protector), solvents and gases (nail polish remover, paint thinner, correction fluid and thinner, toxic markers, pure toluene, cigar lighter fluid, gasoline, carburetor cleaner, octane booster), cleaning agents (dry cleaning fluid, spot remover, degreaser), food products (vegetable cooking spray; dessert topping spray, such as whipped cream or "whippets"), and gases (butane, propane, helium); (2) nitrites—amyl nitrites ("poppers," "snappers") and butyl nitrites ("rush," "locker room," "bolt," "climax," video head cleaner); and (3) chlorofluorohydrocarbons (freons).
 Anesthetic gases (e.g., nitrous oxide, ether, chloroform) are presumed to have been inhaled.
- Opiates/opioids—This category includes opiates (narcotic substances derived from opium) and opioids (semisynthetic and synthetic substances with similar narcotic properties). The category is subdivided into (1) heroin (specified)—includes only specific reports of heroin; (2) methadone—whether used in the treatment of opiate addiction or pain; and (3) all other opiates/opioids—includes nonspecific reports of "opiates" and specific named substances, such as codeine, morphine, fentanyl, hydrocodone, oxycodone, and others.

Drug misuse/abuse: A group defined broadly to include deaths related to drug misuse or abuse. Additional clarification is provided for the following manners of death:

 Overmedication—This category was designed to capture nonmedical use, overuse, and misuse of prescription and OTC medications when this use was not documented as drug abuse.

- Homicide by drug—This category was designed to capture malicious poisonings; that is, the decedent was administered a drug by another person for a malicious purpose. Only cases assigned a manner of death by homicide by the ME/C are classified in this category.
- All other accidental—This category includes all deaths denoted by the ME/C as natural or accidental that
 could not be assigned to any other case type. By design, most deaths of documented drug abuse will fall
 into this category.
- Could not be determined—This category includes all deaths with a manner of death denoted by the ME/C as could not be determined. This manner of death is assigned by the ME/C when a definitive ruling of suicide, homicide, natural, or accidental death is not possible.

Drug-related death: Any death related to recent drug use. To be a DAWN case, a drug needs only to be implicated in the death; the drug does not have to have caused the death. Even if only one drug is reported, it should not be assumed that the substance was the sole and direct cause of the death. (See also **Single-drug case**.) Druginduced deaths are those for which the drug(s) directly caused the death.

Homicide: See Drug misuse/abuse.

Jurisdiction: DAWN uses the term "jurisdiction" to mean the geographic area for which an ME/C's office is responsible.

The terms "death investigation jurisdiction" (or, simply, "jurisdiction") and "county" are used interchangeably because ME/Cs' offices are typically organized by county. The one exception occurs in Niagara County, NY, which is divided into four districts. For reporting purposes, the four districts that make up Niagara County, NY, are treated collectively as a single jurisdiction. Some States are organized in single statewide jurisdictions.

DAWN disaggregates state-level returns by county for the purpose of reporting data at the county and metropolitan levels.

Differences in death investigation procedures are often associated with whether the jurisdiction has a medical examiner system or a coroner system. In addition, there are nearly always some differences in death investigation procedures across States. Differences in death investigation procedures limit the comparability of DAWN ME/C findings.

Manner of death: A classification used to group similar DAWN cases. Each case is coded into one and only one category, the first that applies from the following hierarchy: "Suicide," "Homicide by drugs," "Adverse reaction to medication," "Overmedication," "Accidental ingestion," "All other accidental," and "Could not be determined." The manner of death categories used by DAWN draw from but do not duplicate the manner of death recorded on the death certificate. Figure A-2 depicts the classification hierarchy graphically and provides additional detail on what is included in each category.

Medical examiner (ME): Death investigation jurisdictions typically use either a medical examiner system (ME) or a coroner (C) system. Most medical examiners are licensed physicians or forensic pathologists and are generally appointed (rather than elected). They may have jurisdiction over a county, district, or an entire State. (See also Coroner and Jurisdiction.)

Metropolitan area: An area comprising a relatively large core city or cities and the adjacent geographic areas.

Conceptually, these areas are integrated economic and social units with a large population center. Unless otherwise noted, metropolitan area analyses prepared by DAWN utilize the boundaries established by the Office of Management and Budget (OMB) as updated in 2003.

Overmedication: See Drug misuse/abuse.

Place of death: The location that best describes where the death occurred. The place of death categories on the DAWN data collection form are:

- **Emergency department**—The death occurred in a hospital emergency department.
- Other health care facility—The death occurred in a hospital unit other than an emergency department, nursing home, hospice, or any other health care institution in which the decedent was receiving care.
- *Decedent's home*—The death occurred at the decedent's home, apartment, or other dwelling.
- Other—The location of death was documented in the source record but does not fit into any of the preceding categories.
- *Not documented*—The location of death was not available in the source record.

Race/ethnicity: OMB is responsible for standard protocols for the collection of data on race and ethnicity by federal systems, including DAWN. In October 1997, OMB issued a revised standard protocol that permitted separate reporting of race and Hispanic ethnicity; the ability to capture more than one race for an individual; modifications in nomenclature (e.g., "Black" was changed to "Black or African American"); division of certain categories ("Asian or Pacific Islander" was split into two categories, "Asian" and "Native Hawaiian or Other Pacific Islander"); and elimination of the "Other" category. For data collections such as DAWN, where self-identification of the individual is not feasible, the revised OMB protocol permits a combined format, whereby race and Hispanic ethnicity are recorded in a single data item that could still record multiple entries for race, Hispanic ethnicity, or both.

Since January 2003, DAWN has collected data on race/ethnicity using the combined format. The race/ethnicity categories on the DAWN data collection forms are as follows:

- White—A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American—A person having origins in any of the black racial groups of Africa.
- Hispanic or Latino—A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Asian—A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native—A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.
- Native Hawaiian or Other Pacific Islander—A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- *Not documented*—Used when documentation of race is not available from source records.

Despite the increased detail allowed by these categories and by the provision for multiple entries, the actual race/ethnicity data reported to DAWN is quite limited because race and ethnicity are often not documented with this level of specificity in patient or decedent records. As a result, the classification used to tabulate DAWN data has a more limited set of categories, as follows:

- White—Anyone meeting the definition of white (above). Those who are identified as white and Hispanic are classified as Hispanic.
- Black—Anyone meeting the definition of black or African American (above). Those who are identified as black or African American and Hispanic are classified as Hispanic.
- Hispanic—Anyone whose ethnicity is Hispanic or Latino (above) is placed in the category Hispanic, regardless of race.
- Race/ethnicity NTA—This includes those categories that are too small to report independently, including two or more races; American Indian or Alaska Native; Asian; and Native Hawaiian or Other Pacific Islander.
- *Unknown*—Race/ethnicity is unknown. Those who are identified only as Hispanic are classified as Hispanic.

Single-drug case: A single-drug case is one in which only one drug was involved. Because multiple substances may be recorded for each DAWN case (see **Drug**), readers should be cautious in interpreting the relationship between a given drug and the number of associated visits or deaths. For example, if the source record for a patient or decedent documented marijuana use, this does not mean that marijuana was the only drug involved in the visit or death or that marijuana caused the visit or death. One should always consider whether and how many other drugs were used in combination. Even then, attributing a causal relationship between the visit or death and a particular drug may not be possible. DAWN captures single-drug visits or deaths involving alcohol only if the decedent was younger than age 21.

Suicide: This category includes cases denoted by the ME/C as suicide if the decedent took his or her own life and legal or illegal drugs had been involved; drug use need not have been the cause of death.

Toxic effects: Injury, illness, or damage that can be attributed to the ingestion of a drug. (See also **Cause of death**.)

187

APPENDIX C

MULTUM LEXICON END-USER LICENSE AGREEMENT

1. Introduction

- A. This License Agreement (the "License") applies to the Multum Lexicon database (the "Database"). This License does not apply to any other products or services of Cerner Multum, Inc. ("Multum"). A "work based on the Database" means either the Database or any derivative work under copyright law; i.e., a work containing the Database or a substantial portion of it, either verbatim or with modifications. A translation of the Database is included without limitation in the term "modification". Each end-user/licensee is addressed herein as "you".
- B. Your use of the Database acknowledges acceptance of these restrictions, disclaimers, and limitations. You expressly acknowledge and agree that Multum is not responsible for the results of your decisions resulting from the use of the Database, including, but not limited to, your choosing to seek or not to seek professional medical care, or from choosing or not choosing specific treatment based on the Database.
- C. Every effort has been made to ensure that the information provided in the Database is accurate, up-to-date, and complete, but no guarantee is made to that effect. In addition, the drug information contained herein may be time sensitive.
- D. Multum does not assume any responsibility for any aspect of healthcare administered or not administered with the aid of information the Database provides.

2. Terms and Conditions for Copying, Distribution and Modification

- A. You may copy and distribute verbatim copies of the Database as you receive it, in any medium, provided that you conspicuously and appropriately publish on each copy an appropriate copyright notice and disclaimer of warranty; keep intact all the notices that refer to this License and to the absence of any warranty; and give any other recipients of the Database a copy of this License (the readme.txt file) along with the Database and anything else that is part of the package, which should be identified.
- B. You may modify your copy or copies of the Database or any portion of it to form a derivative work, and copy and distribute such modifications or work under the terms of Section 2.A. above, provided that you also meet all of these conditions:
 - i) You must cause the modified files to carry prominent notices stating that they are derived from the Multum Lexicon database from Cerner Multum, Inc. and that you changed the files and the date of any change(s).
 - ii) If you incorporate modified files into a computer program, you must cause it, when started running for interactive use in the most ordinary way, to print or display an announcement including an appropriate copyright notice, a notice that you have modified the Multum Lexicon database from Cerner Multum, Inc., and a notice that there is no warranty (or that you provide the warranty) and telling the user how to view a copy of this License.

- C. It is not the intent of this section to claim rights or contest your rights to work written entirely by you; rather, the intent is to exercise the right to control the distribution of derivative or collective works based on the Database.
- D. You may copy and distribute the Database (or a work based on it, under Section 2.B.) in an encoded form under the terms of Sections 2.A. and 2.B. above provided that you also do one of the following:
 - i) Accompany it with the complete corresponding machine-readable plain text, which must be distributed under the terms of Sections 2.A and 2.B. above on a medium customarily used for software interchange; or,
 - ii) Accompany it with a written offer to give any third party, for no charge, a complete machine-readable copy of the Database (and the entirety of your derivative work based on it, under Section 2.B.), to be distributed under the terms of Sections 2.A. and 2.B. above on a medium customarily used for software interchange.
- E. You may not copy, modify, sublicense, or distribute the Database except as expressly provided under this License. Any attempt otherwise to copy, modify, sublicense or distribute the Database will automatically terminate your rights under this License. However, parties who have received copies, or rights, from you under this License will not have their licenses terminated so long as such parties remain in full compliance.
- F. You are not required to accept this License. However, nothing else grants you permission to copy, modify or distribute the Database or its derivative works. These actions are prohibited by law if you do not accept this License. Therefore, by copying, modifying or distributing the Database (or any work based on the Database), you indicate your acceptance of this License to do so, and all its terms and conditions for copying, distributing or modifying the Database or works based on it.
- G. Each time you redistribute the Database (or any work based on the Database), the recipient automatically receives a license from Multum to copy, distribute or modify the Database subject to these terms and conditions. You may not impose any further restrictions on the recipients' exercise of the rights granted herein. You are not responsible for enforcing compliance by third parties to this License.

3. Disclaimer of Warranties; Limitation of Damages

A. BECAUSE THE DATABASE IS LICENSED FREE OF CHARGE, THERE IS NO WARRANTY FOR THE PROGRAM OR DATA, TO THE EXTENT PERMITTED BY APPLICABLE LAW. EXCEPT WHEN OTHERWISE STATED IN WRITING. MULTUM AND/OR OTHER PARTIES PROVIDE THE DATABASE "AS IS" WITHOUT WARRANTY OF ANY KIND, EITHER EXPRESSED, STATUTORY OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE. THE ENTIRE RISK AS TO THE QUALITY AND PERFORMANCE OF THE DATABASE IS WITH YOU. SHOULD THE DATABASE PROVE DEFECTIVE, INCOMPLETE, OR INACCURATE, YOU ASSUME THE RESPONSIBILITY AND COST OF ALL NECESSARY SERVICING, REPAIR OR CORRECTION.

B. IN NO EVENT (UNLESS REQUIRED BY APPLICABLE LAW OR AGREED TO IN WRITING) WILL MULTUM, OR ANY OTHER PARTY WHO MAY MODIFY AND/OR REDISTRIBUTE THE DATABASE AS PERMITTED ABOVE, BE LIABLE FOR ANY SPECIAL, INCIDENTAL, CONSEQUENTIAL, OR INDIRECT DAMAGES, INCLUDING DAMAGES FOR LOSS OF PROFITS, LOSS OF BUSINESS, OR DOWN TIME, EVEN IF MULTUM OR ANY OTHER PARTY HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.

- C. IN ADDITION, WITHOUT LIMITING THE FOREGOING, THE DATABASE HAS BEEN DESIGNED FOR USE IN THE UNITED STATES ONLY AND COVERS THE DRUG PRODUCTS USED IN PRACTICE IN THE UNITED STATES. MULTUM PROVIDES NO CLINICAL INFORMATION OR CHECKS FOR DRUGS NOT AVAILABLE FOR SALE IN THE UNITED STATES AND CLINICAL PRACTICE PATTERNS OUTSIDE THE UNITED STATES MAY DIFFER SUBSTANTIALLY FROM INFORMATION SUPPLIED BY THE DATABASE. MULTUM DOES NOT WARRANT THAT USES OUTSIDE THE UNITED STATES ARE APPROPRIATE.
- D. You acknowledge that updates to the Database are at the sole discretion of Multum. Multum makes no representations or warranties whatsoever, express or implied, with respect to the compatibility of the Database, or future releases thereof, with any computer hardware or software, nor does Multum represent or warrant the continuity of the features or the facilities provided by or through the Database as between various releases thereof.
- E. Any warranties expressly provided herein do not apply if: (i) the end-user alters, mishandles or improperly uses, stores or installs all, or any part, of the Database, (ii) the end-user uses, stores or installs the Database on a computer system which fails to meet the specifications provided by Multum, or (iii) the breach of warranty arises out of or in connection with acts or omissions of persons other than Multum.

4. Assumption of Risk, Disclaimer of Liability, Indemnity

- A. THE END-USER ASSUMES ALL RISK FOR SELECTION AND USE OF THE DATABASE AND CONTENT PROVIDED THEREON. MULTUM SHALL NOT BE RESPONSIBLE FOR ANY ERRORS, MISSTATEMENTS, INACCURACIES OR OMISSIONS REGARDING CONTENT DELIVERED THROUGH THE DATABASE OR ANY DELAYS IN OR INTERRUPTIONS OF SUCH DELIVERY.
- B. THE END-USER ACKNOWLEDGES THAT MULTUM: (A) HAS NO CONTROL OF OR RESPONSIBILITY FOR THE END-USER'S USE OF THE DATABASE OR CONTENT PROVIDED THEREON, (B) HAS NO KNOWLEDGE OF THE SPECIFIC OR UNIQUE CIRCUMSTANCES UNDER WHICH THE DATABASE OR CONTENT PROVIDED THEREON MAY BE USED BY THE END-USER, (C) UNDERTAKES NO OBLIGATION TO SUPPLEMENT OR UPDATE CONTENT OF THE DATABASE, AND (D) HAS NO LIABILITY TO ANY PERSON FOR ANY DATA OR INFORMATION INPUT ON THE DATABASE BY PERSONS OTHER THAN MULTUM.
- C. MULTUM SHALL NOT BE LIABLE TO ANY PERSON (INCLUDING BUT NOT LIMITED TO THE END-USER AND PERSONS TREATED BY OR ON BEHALF OF THE END-USER) FOR, AND THE END-USER AGREES TO INDEMNIFY AND HOLD MULTUM HARMLESS FROM ANY CLAIMS, LAWSUITS, PROCEEDINGS, COSTS, ATTORNEYS' FEES, DAMAGES OR OTHER LOSSES (COLLECTIVELY, "LOSSES") ARISING OUT OF OR RELATING TO (A) THE END-USER'S USE OF THE DATABASE OR CONTENT PROVIDED THEREON OR ANY EQUIPMENT FURNISHED IN CONNECTION THEREWITH AND (B) ANY DATA OR INFORMATION INPUT ON THE DATABASE BY END-USER, IN ALL CASES INCLUDING BUT NOT LIMITED TO LOSSES FOR TORT, PERSONAL INJURY, MEDICAL MALPRACTICE OR PRODUCT LIABILITY.

5. Miscellaneous

- A. You warrant that you have authority within the organization you identified during registration for the Database to enter into license agreements with other organizations including Multum.
- B. You agree that Multum may identify you and/or your organization by name as a "licensee", "licensed user", or "licensing organization" of the Database or a "client" of Multum in Multum's external market communications. You also agree that Multum may issue, if it desires, a press release stating that you and/or your organization have licensed the Database.
- C. If conditions are imposed on you (whether by court order, agreement or otherwise) that contradict the conditions of this License, they do not excuse you from the conditions of this License. If you cannot distribute so as to satisfy simultaneously your obligations under this License and any other obligations, then as a consequence you may not distribute the Database at all.
- D. If any portion of this License is held invalid or unenforceable under any particular circumstance, the balance of this License is intended to apply and the License as a whole is intended to apply in other circumstances.
- E. If the distribution and/or use of the Database is or becomes restricted in certain countries either by patents or by copyrighted interfaces, Multum may add an explicit geographical distribution limitation excluding those countries, so that distribution is permitted only in or among countries not thus excluded. In such case, this License incorporates the limitation as if written in the body of this License.

Multum Lexicon
Copyright © 1997-2008
Cerner Multum, Inc.
3200 Cherry Creek South Drive, Suite 300
Denver, CO 80209
Document revised April 1, 2003