

# VIRGINIA DEPARTMENT OF HEALTH

## OFFICE OF THE CHIEF MEDICAL EXAMINER

*“To promote and protect the health of all Virginians”*

# Fatal Drug Overdose Quarterly Report

## 2<sup>ND</sup> QUARTER 2023

**Edition 2023.2**

Publication Date:  
October 2023

# METHODS, CONSIDERATIONS, AND LIMITATIONS

This quarterly report contains the most recent number of drug related deaths in Virginia for the previous quarter. **The numbers represented in this report are preliminary, subject to change, and are most likely slightly under reported at the time of publication** due to operational practices and limitations (specifically case turnaround time for reports) within the agency; therefore updates and/or changes to numbers previously published in past reports should be expected. It is highly recommended that when citing these data and reports, the edition number is included.

Data analyzed in the report is obtained from the Virginia Medical Examiner Database System (VMEDS). VMEDS is an internal agency database which contains detailed information on all deaths reported to the OCME. Data presented in this report is based upon accepted cases of either full autopsy or external exams. All manners of fatal drug overdoses (accident, homicide, suicide, and undetermined) are included in this report.

Due to the nature of law enforcement and OCME death investigation, all deaths presented in this report are based upon locality of occurrence and not residential status of the decedent. The numbers and rates of these death by locality of injury and drug name/drug category are available in separate documents (<http://www.vdh.virginia.gov/medical-examiner/forensic-epidemiology/>).

This report compiles data on drugs causing or contributing to death in fatal drug overdose cases. This report does not include data on drugs detected, but not contributing or causing death. **Often, drug-related deaths have more than one drug causing or contributing to death. Therefore, deaths in which multiple categories of drugs caused or contributed to death will be represented once within each drug category, but multiple times within the entire report. Example: a fatal cocaine, heroin, and alprazolam overdose death will be counted in the cocaine summary, the heroin summary, and the benzodiazepine summary.**

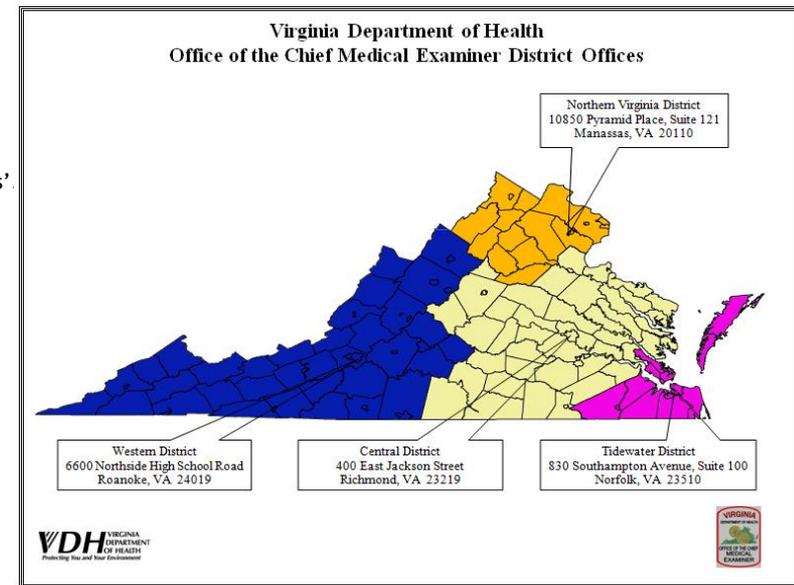
Prescription Opioids analyzed in this report include buprenorphine, codeine, hydrocodone, hydromorphone, levorphanol, meperidine, methadone, morphine, oxycodone, oxymorphone, pentazocine, propoxyphene, tapentadol, and tramadol and are included in the category of 'Prescription Opioids'. Benzodiazepines analyzed in this report include adinazolam, alprazolam, bromazolam, clonazepam, clonazolam, deschloroetizolam, diazepam, etizolam, flualprazolam, flubromazolam, flubromazepam, flurazepam, lorazepam, meclonazepam, midazolam, nordiazepam, oxazepam, phenazepam, temazepam, and triazolam and are included in the category of 'Benzodiazepines'

Projected estimates for 2023 (entire year) are calculated based upon initial counts by quarter, average toxicology turnaround time at the time of the report, the date of data analysis, and previous quarter fatality trend review.

Rate calculations are based upon Virginia population projections. These population estimates came from the Virginia Department of Health, Division of Health Statistics (<http://www.vdh.virginia.gov/HealthStats/stats.htm>).

Quarters are based upon calendar year and are defined as follows:

- Quarter 1 (Q1)- January 1<sup>st</sup> - March 31<sup>st</sup>
- Quarter 2 (Q2)- April 1<sup>st</sup> - June 30<sup>th</sup>
- Quarter 3 (Q3)- July 1<sup>st</sup> - September 31<sup>st</sup>
- Quarter 4 (Q4)- October 1<sup>st</sup> - December 31<sup>st</sup>



\*\*\* This document is currently being remediated to meet the VDH accessibility requirements\*\*\*

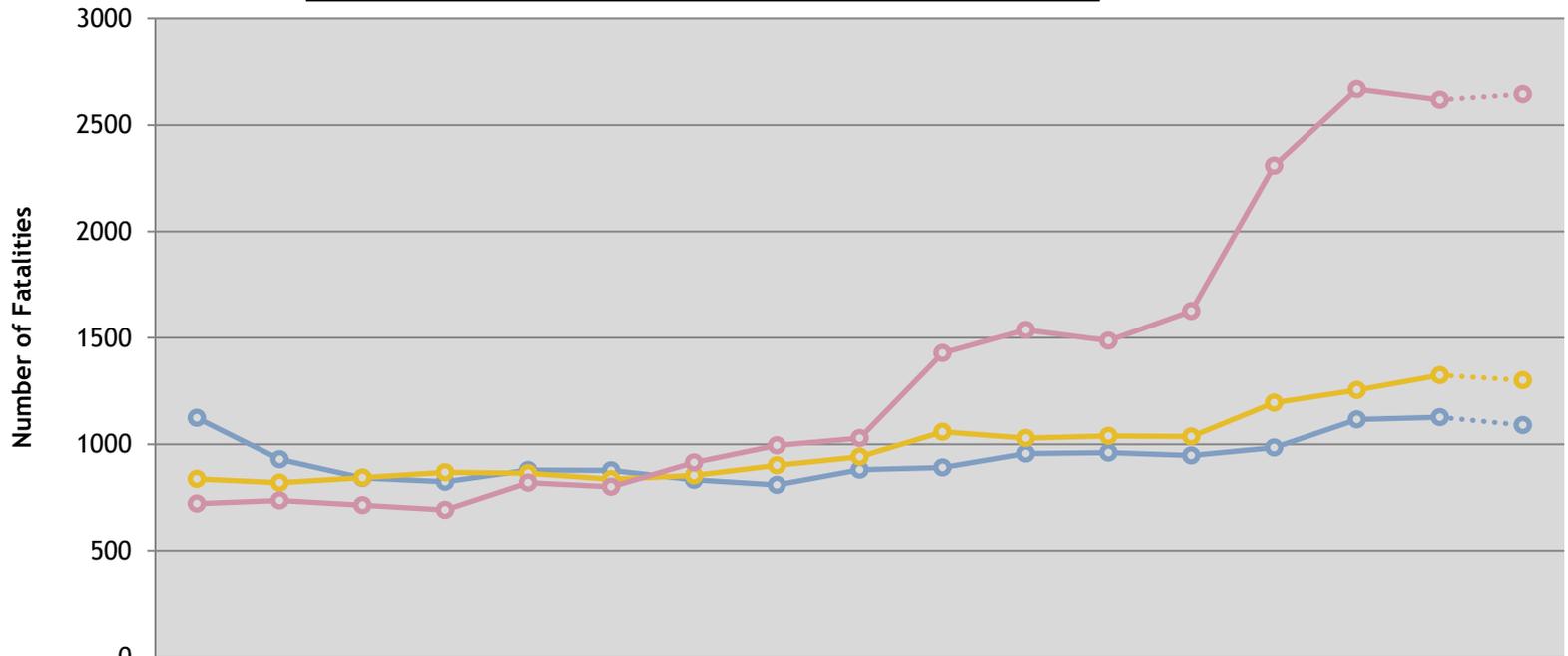
# MAIN TAKEAWAYS

- Fatal drug overdose has been the leading method of unnatural death in Virginia since 2013
- Opioids, specifically illicit fentanyl, have been the driving force behind the large increases in fatal overdoses since 2013
- In 2015 statewide, the number of illicit opioids deaths surpassed prescription (Rx) opioid deaths. This trend continued at a greater magnitude in 2016 to present
- From 2007-2021, there wasn't a significant increase or decrease in fatal prescription (Rx) opioid overdoses; however, in 2022, there was a large drop in Rx opioid overdoses compared to the past 15-year span
- Fentanyl (prescription, illicit, and/or analogs) caused or contributed to death in 75.7% of all fatal overdoses in 2022
- Fatal non-opioid illicit drug overdoses are on the rise. In 2022, fatal cocaine overdoses increased 22.0% and fatal methamphetamine overdoses increased 5.3% compared to 2021
- In 2022, the most common combination of substances causing fatal overdoses was cocaine and fentanyl, representing 30.6% of all overdose deaths

# TOP 3 METHODS OF UNNATURAL DEATH

The leading methods of unnatural death in Virginia since 2007 have been motor vehicle collisions, gun-related deaths, and fatal drug overdoses (these methods of death include all manners of death: accident, homicide, suicide, and undetermined). In 2013, fatal drug overdose became the leading method of unnatural death in the Commonwealth. This trend has continued to worsen at a greater magnitude due mainly to illicit opioids (heroin, illicit fentanyl, and fentanyl analogs).

**Total Number of Motor Vehicle, Gun, and Drug Related Fatalities by Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



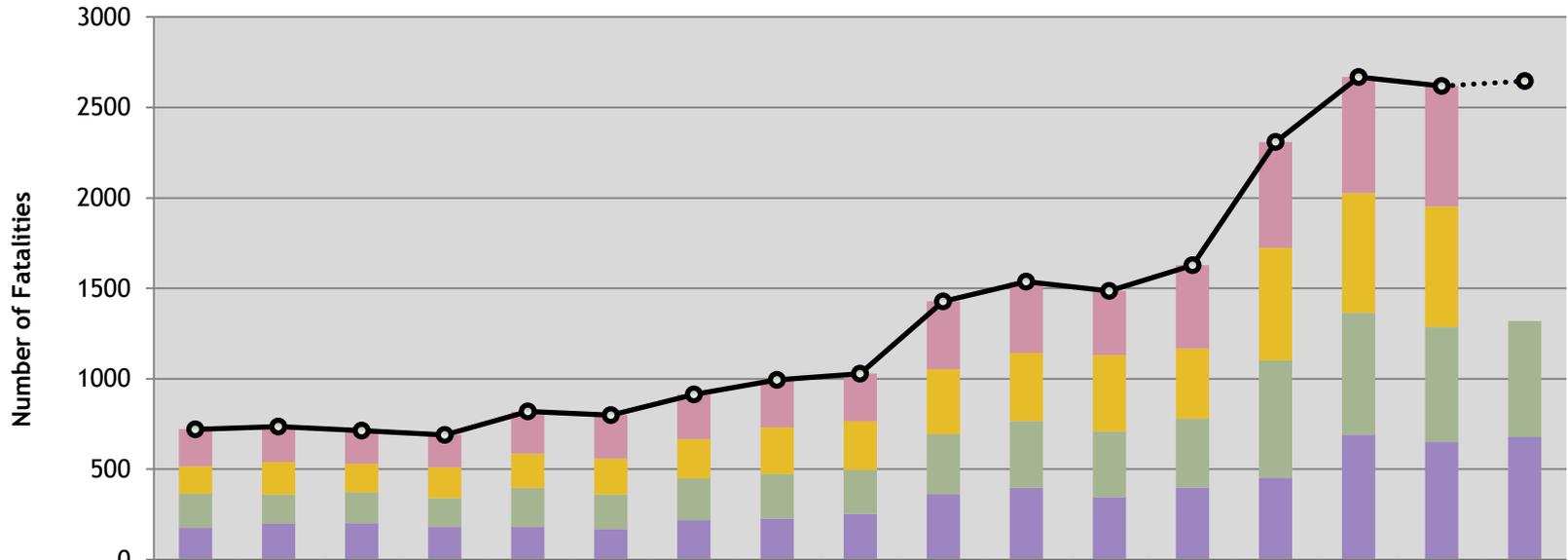
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
Motor Vehicle Related	1124	928	841	823	878	877	832	808	879	890	955	960	947	984	1116	1127	1090
Gun Related	836	818	843	868	863	835	852	901	940	1058	1028	1038	1036	1195	1255	1325	1300
Fatal Drug Overdose	721	735	713	690	819	799	914	994	1028	1428	1537	1486	1627	2309	2669	2619	2646

<sup>1</sup> Top 3 methods of death (motor vehicles, guns, and drugs) include all manners of death (accident, homicide, suicide, and undetermined)

# ALL DRUGS

The total number of fatal drug overdoses statewide has increased each year. In 2013, fatal drug overdose became the number one method of unnatural death in the Commonwealth, surpassing both motor vehicle-related fatalities and gun-related fatalities. In 2014, fatal drug overdose became the leading cause of accidental death in Virginia. Fatal overdoses, all substance, decreased by 1.9% in 2022 when compared to 2021.

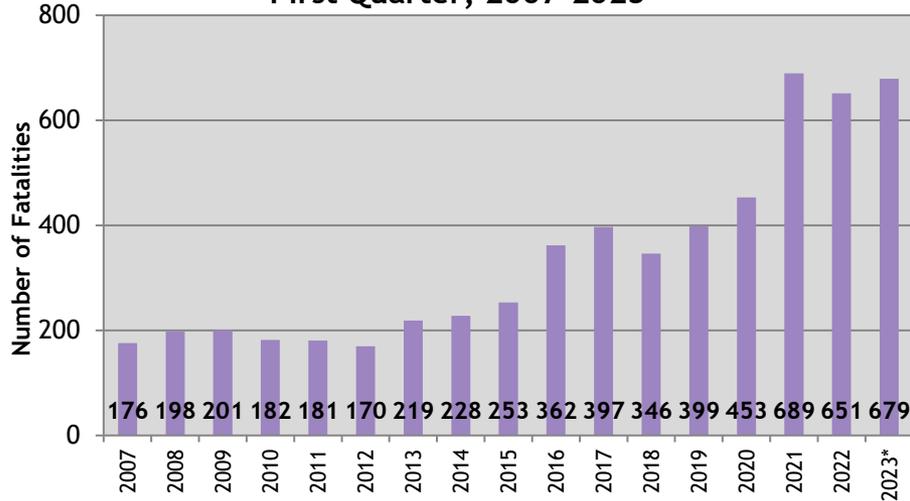
**Total Number of Fatal Drug Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



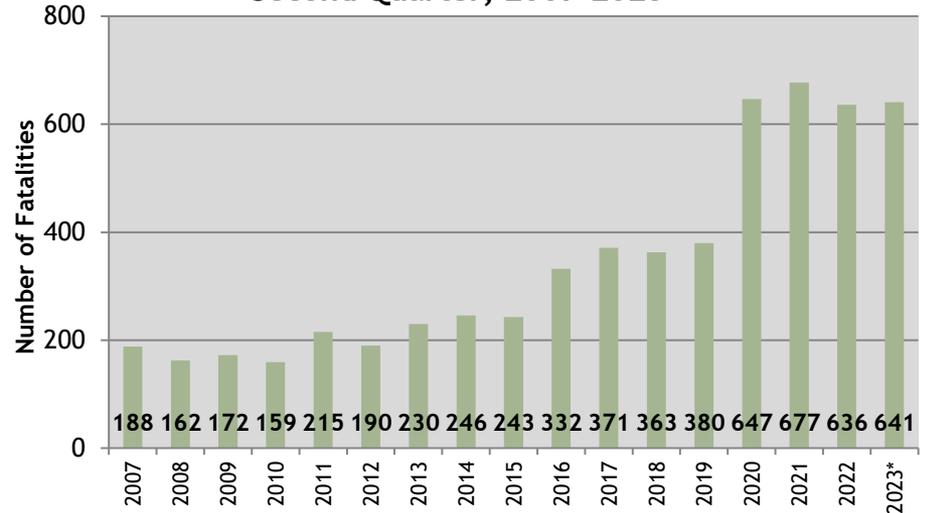
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
Q4	205	195	183	179	232	240	248	263	262	375	393	354	460	585	643	665	
Q3	152	180	157	170	191	199	217	257	270	359	376	423	389	624	660	667	
Q2	188	162	172	159	215	190	230	246	243	332	371	363	380	647	677	636	641
Q1	176	198	201	182	181	170	219	228	253	362	397	346	399	453	689	651	679
Total Fatalities	721	735	713	690	819	799	914	994	1028	1428	1537	1486	1628	2309	2669	2619	2646

# ALL DRUGS

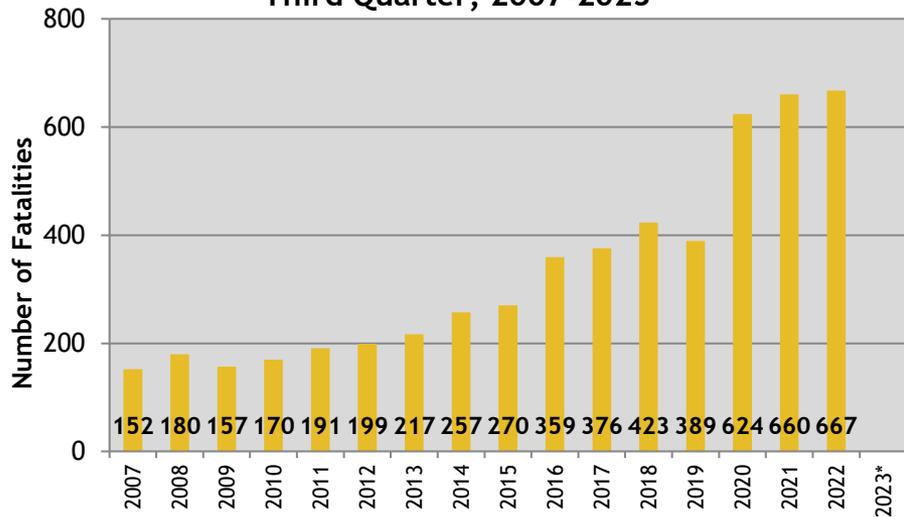
First Quarter, 2007-2023\*



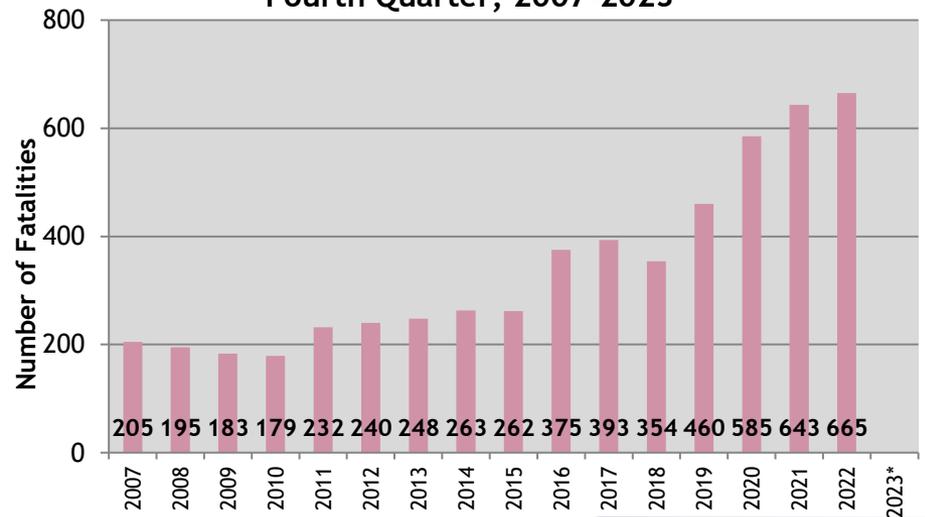
Second Quarter, 2007-2023\*



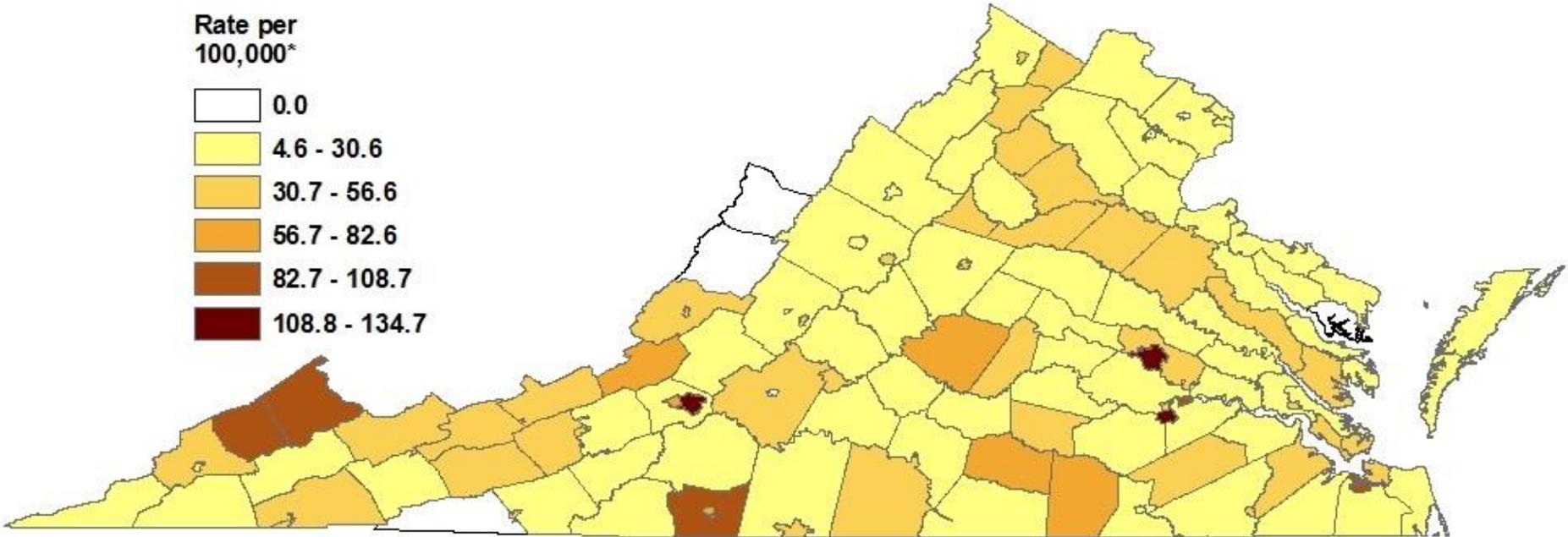
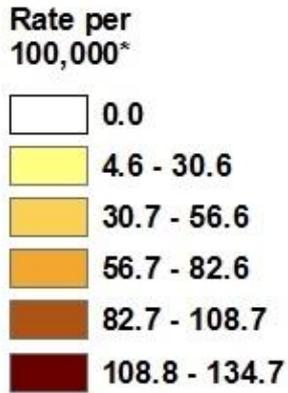
Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*



# Rate of All Fatal Drug Overdoses, All Substances, by Locality of Overdose, 2022



Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# FATAL DRUG OVERDOSES BY NAME/CATEGORY

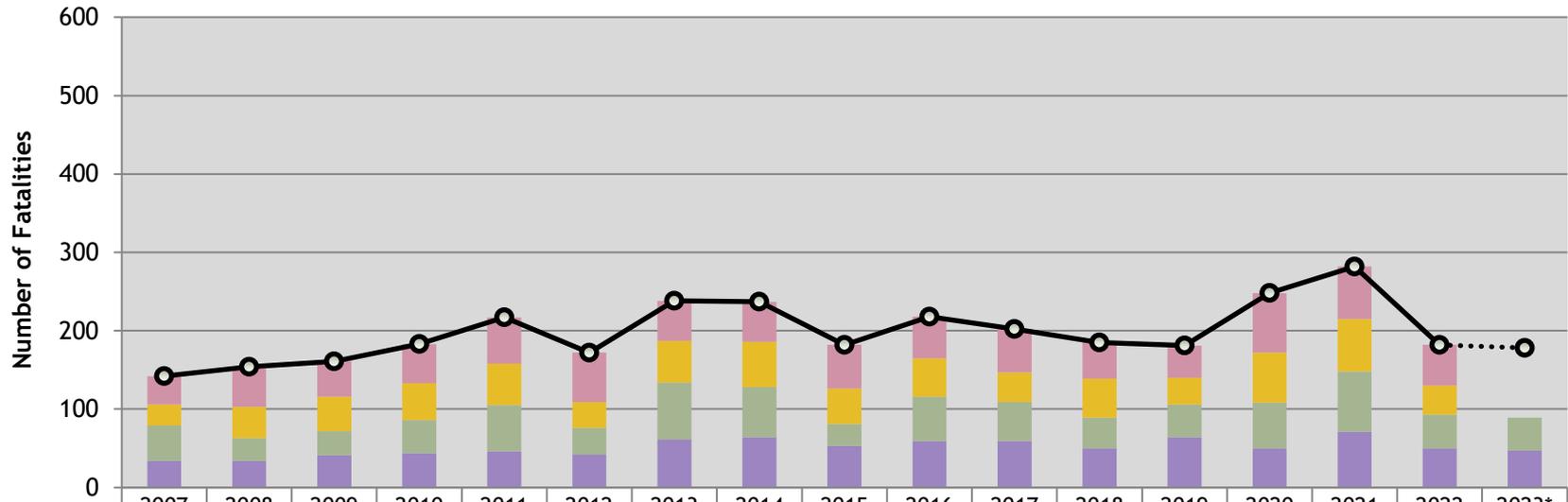


- Benzodiazepines
- Cocaine
- Fentanyl
- Heroin
- Prescription Opioids (Excluding Fentanyl)

# BENZODIAZEPINES

The number of fatal benzodiazepine-related overdoses has fluctuated each year. It is very uncommon for a decedent to fatally overdose on one or more benzodiazepines alone. However, when a person ingests other substances (e.g. alcohol, opiates, methamphetamine) in addition to larger, nontherapeutic amounts of benzodiazepines, the user is potentially creating a lethal cocktail of mixed substances. Fatal benzodiazepine overdoses often had one or more prescription opioids (excluding fentanyl) causing or contributing to death; however, this proportion has slowly decreased in recent years from nearly 90% in 2007 to 41.2% in 2022. Nearly 74% of benzodiazepine overdoses in 2022 also had fentanyl causing death.

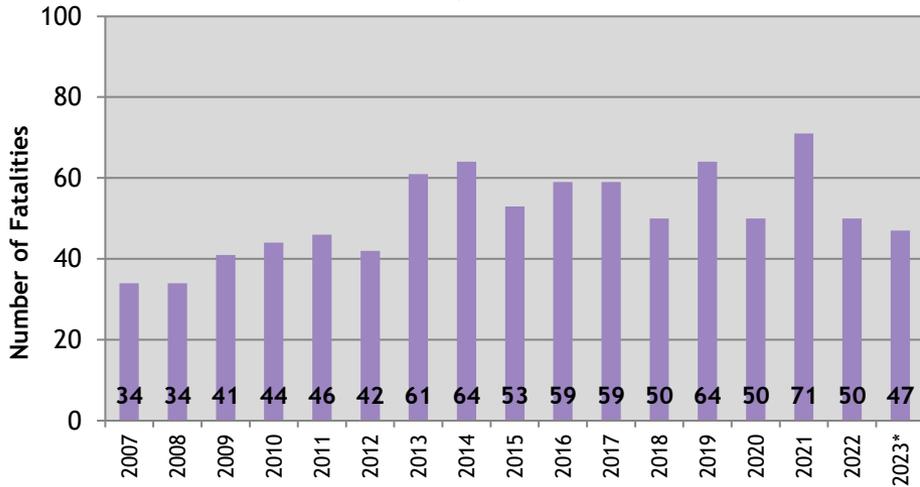
**Total Number of Fatal Benzodiazepine Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



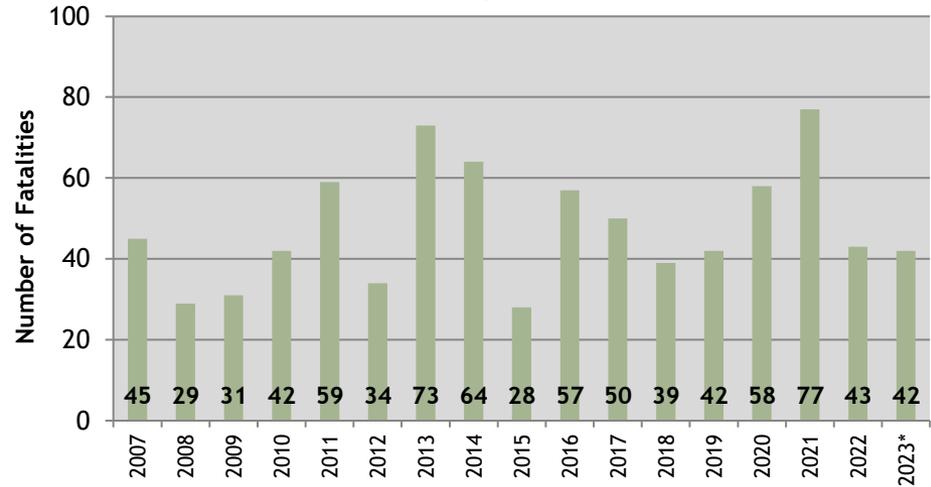
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
Q4	36	51	45	50	59	63	51	51	56	53	55	46	41	76	67	52	
Q3	27	40	44	47	53	33	53	58	45	49	38	50	34	64	67	37	
Q2	45	29	31	42	59	34	73	64	28	57	50	39	42	58	77	43	42
Q1	34	34	41	44	46	42	61	64	53	59	59	50	64	50	71	50	47
● Total Fatalities	142	154	161	183	217	172	238	237	182	218	202	185	181	248	282	182	178

# BENZODIAZEPINES

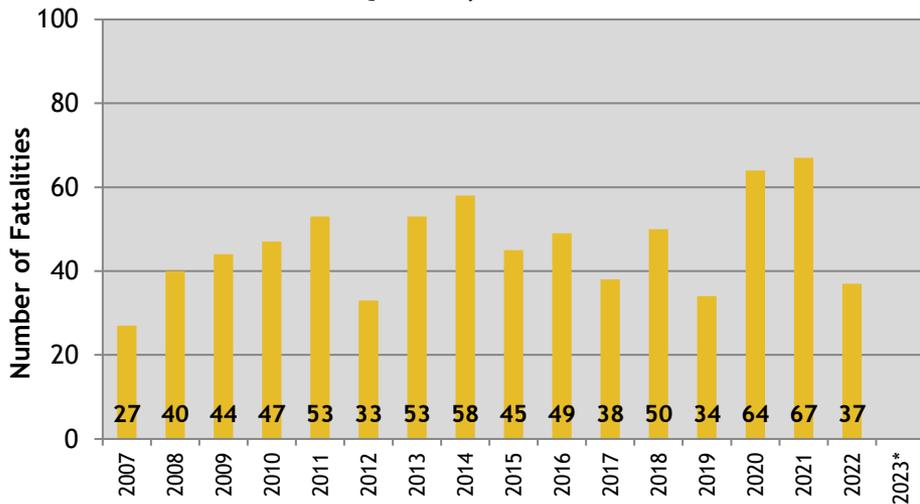
First Quarter, 2007-2023\*



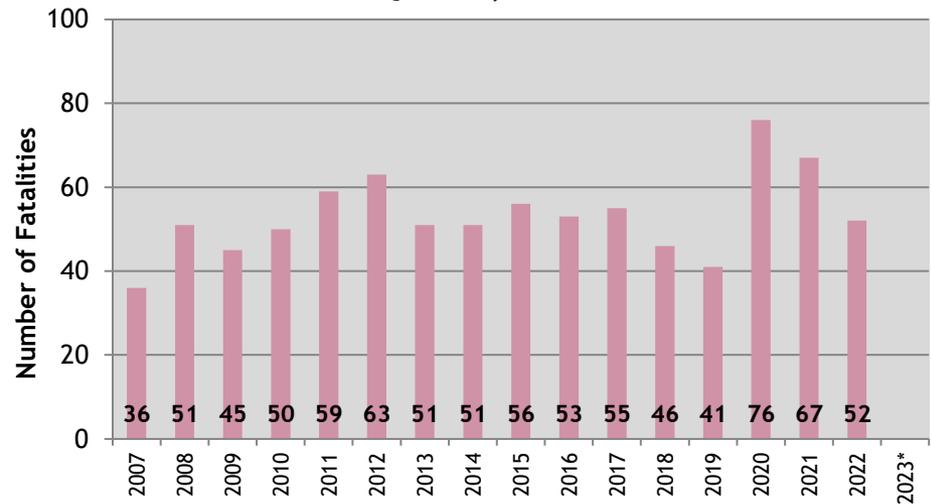
Second Quarter, 2007-2023\*



Third Quarter, 2007-2023\*

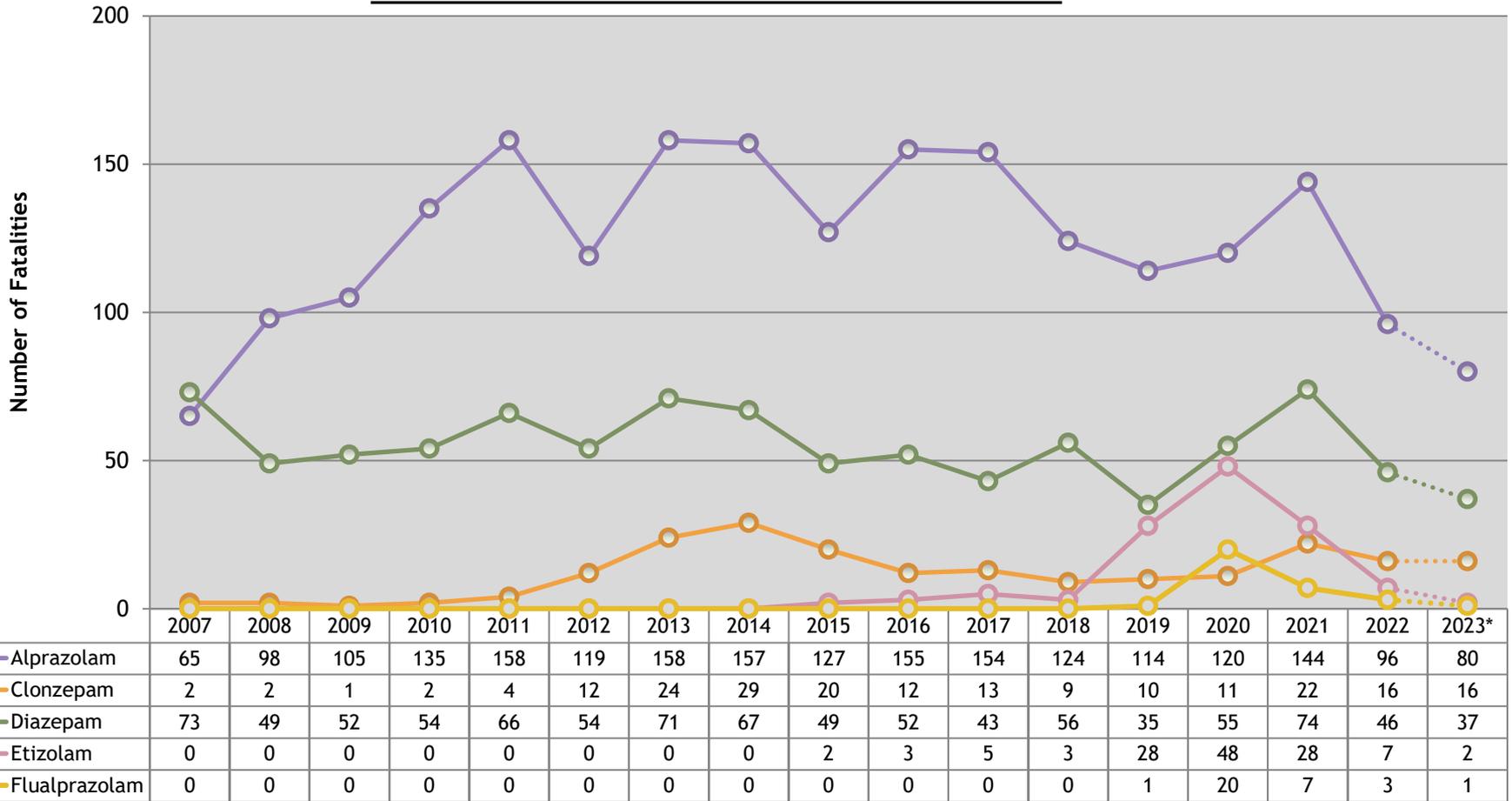


Fourth Quarter, 2007-2023\*



# BENZODIAZEPINES

Total Number of Fatal Benzodiazepine Overdoses by Drug Name and Year of Death, 2007-2023\*  
Data for 2023 is a Predicted Total for the Entire Year

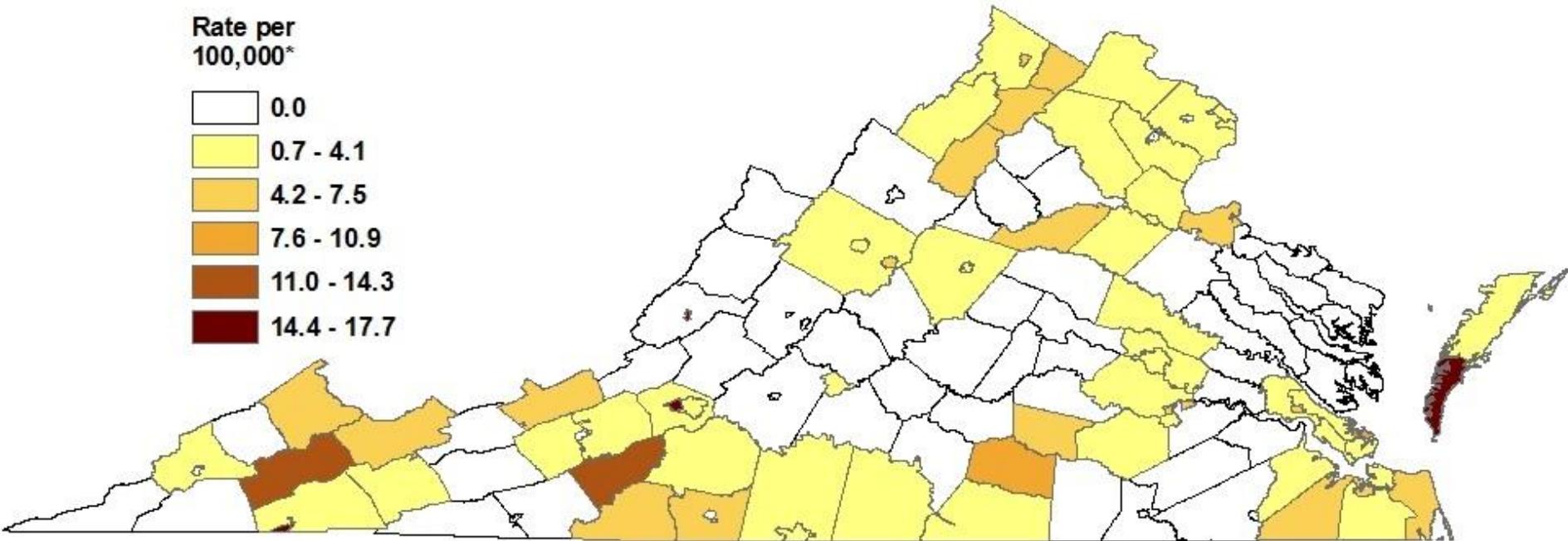
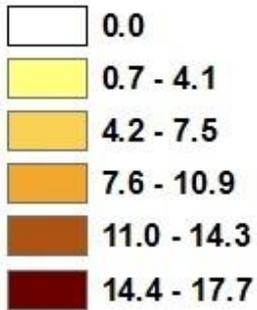


<sup>1</sup> Flurazepam, lorazepam, midazolam, nordiazepam, oxazepam, temazepam and triazolam were excluded from this analysis because of low annual case counts (<20 deaths per year)

<sup>2</sup> Each benzodiazepine is tallied by each time it caused or contributed to death (analyzed from either toxicology or the cause of death statement) and therefore the total number of benzodiazepines will far exceed the actual number of fatalities

## Rate of Fatal Benzodiazepine Overdoses by Locality of Overdose, 2022

Rate per  
100,000\*



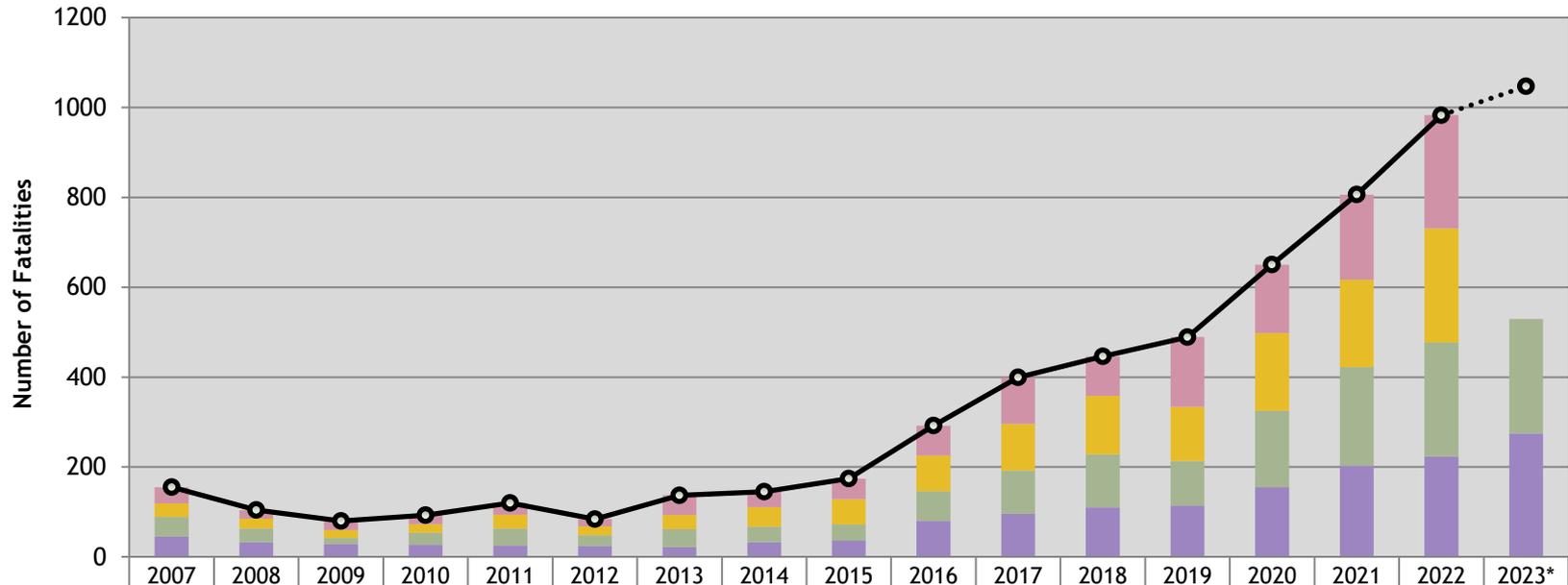
Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# COCAINE

The total number of fatal cocaine-related overdoses statewide has been slowly increasing since 2013. Of the 983 fatal cocaine overdoses in 2022, 81.6% also included fentanyl (prescription, illicit, or analogs). The number of fatal cocaine overdoses in 2022 increased by 22.0% compared to 2021.

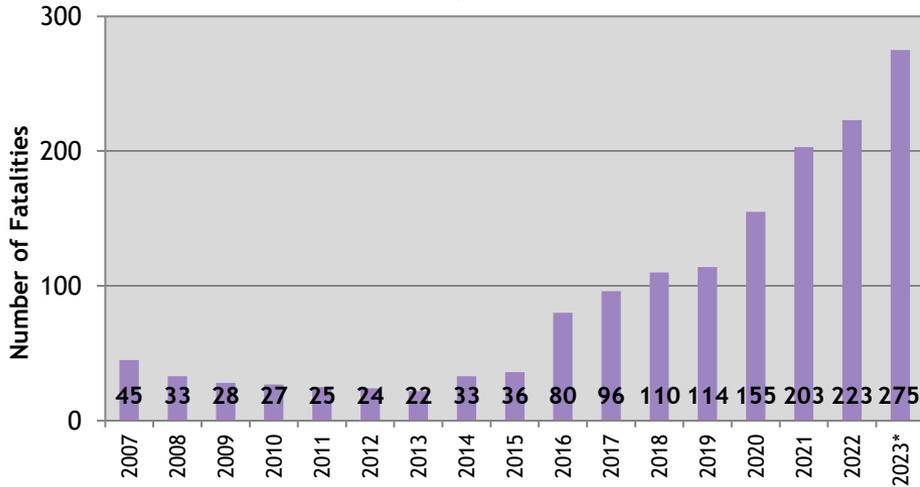
**Total Number of Fatal Cocaine Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



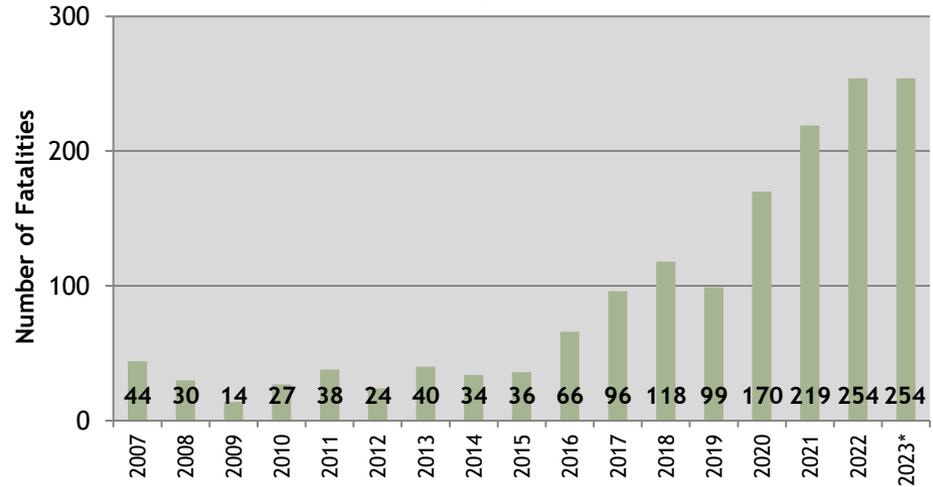
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
Q4	36	19	20	20	26	16	44	34	46	67	103	88	155	152	189	252	
Q3	30	22	18	19	31	20	31	44	56	79	104	130	121	173	195	254	
Q2	44	30	14	27	38	24	40	34	36	66	96	118	99	170	219	254	254
Q1	45	33	28	27	25	24	22	33	36	80	96	110	114	155	203	223	275
—●— Total Fatalities	155	104	80	93	120	84	137	145	174	292	399	446	489	650	806	983	1047

# COCAINE

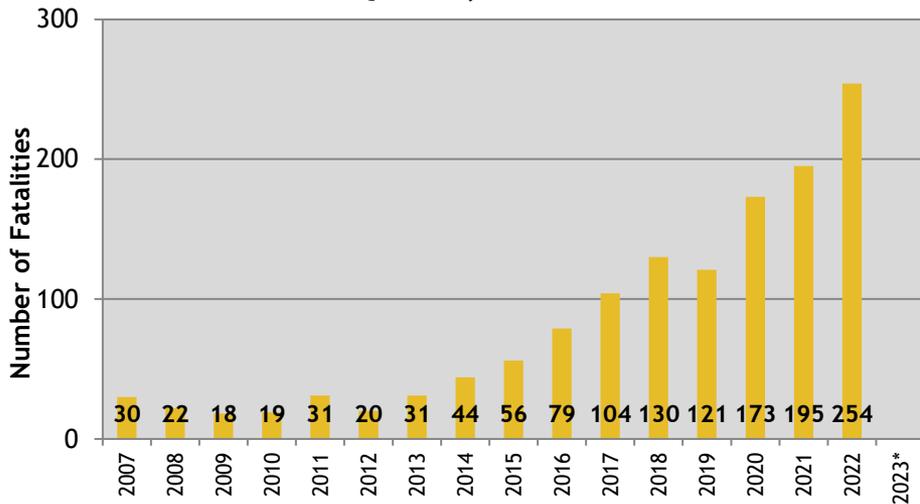
First Quarter, 2007-2023\*



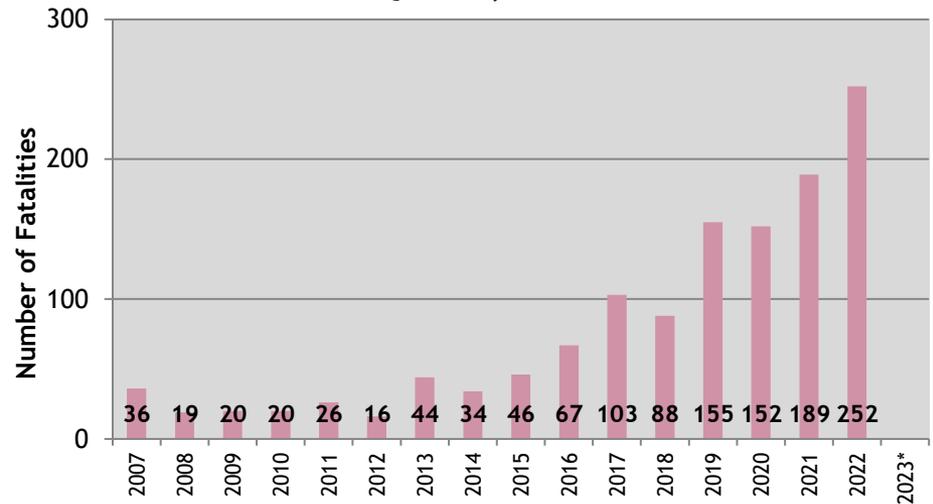
Second Quarter, 2007-2023\*



Third Quarter, 2007-2023\*

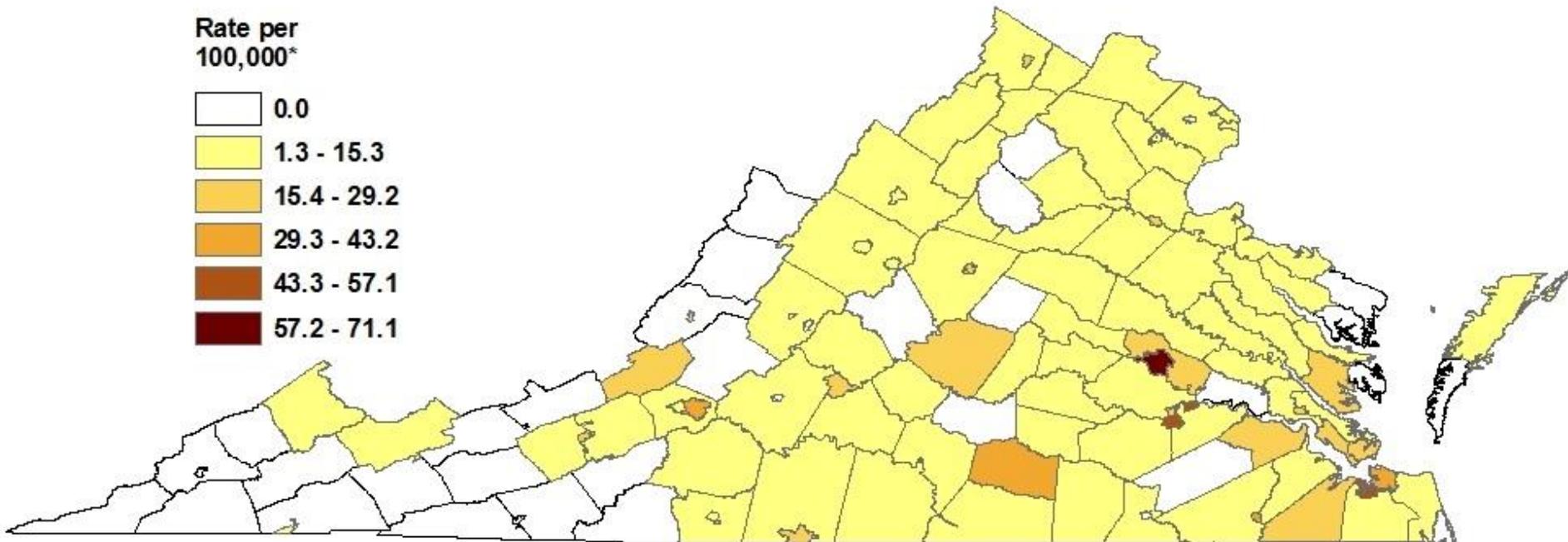
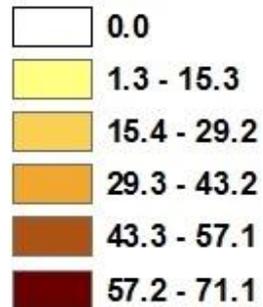


Fourth Quarter, 2007-2023\*



## Rate of Fatal Cocaine Overdoses by Locality of Overdose, 2022

Rate per  
100,000\*



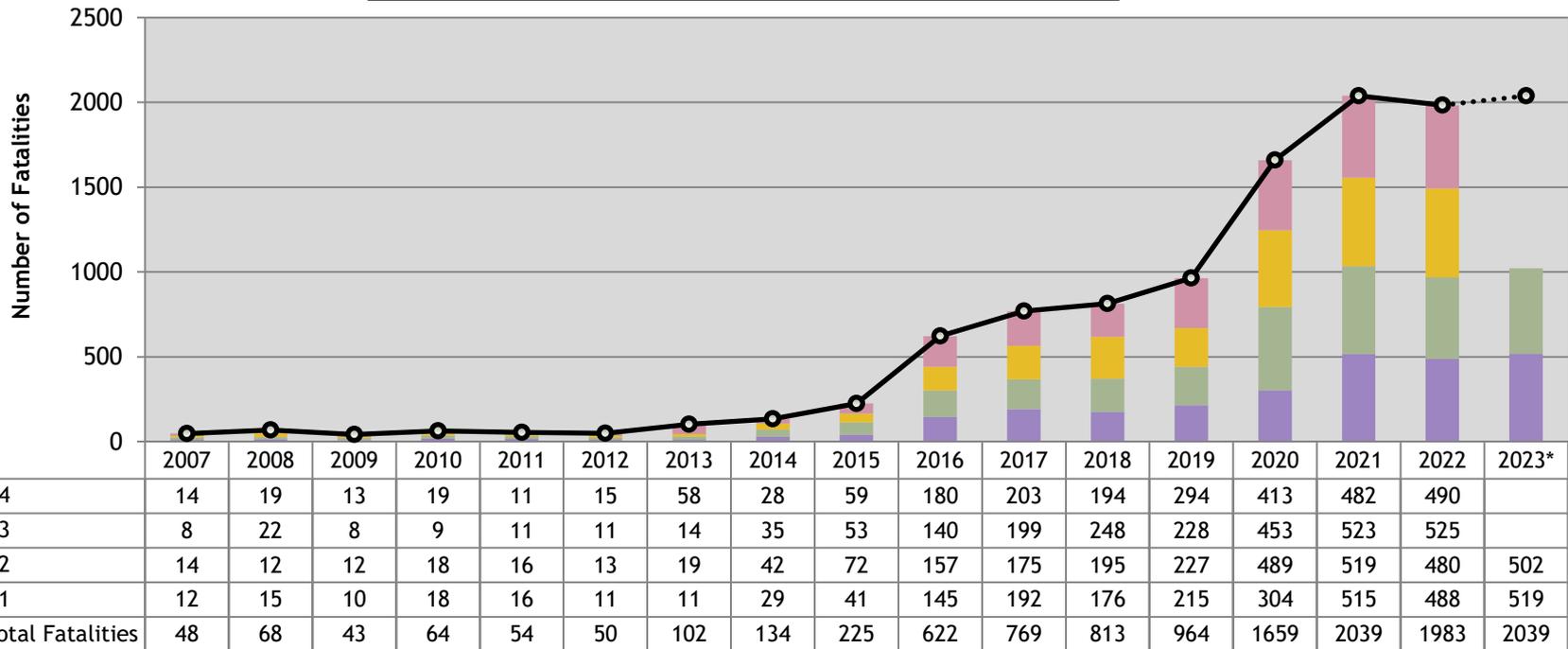
Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# FENTANYL

The number of fatal fentanyl-related drug overdoses began increasing in 2012; which coincides with the dramatic increase in fatal heroin overdoses. Prior to 2013, most fentanyl-related deaths were due to illicit use of pharmaceutically produced fentanyl. However, in late 2013, early 2014, law enforcement investigations and toxicology testing demonstrated an increase in illicitly produced fentanyl. By 2016, most fatal fentanyl-related overdoses were due to illicitly produced fentanyl and fentanyl analogs, and not pharmaceutically produced fentanyl. For statistical purposes, 'fentanyl' includes all pharmaceutically produced fentanyl, illicitly produced fentanyl, and fentanyl analogs. The number of fatal fentanyl overdoses in 2022 compared to 2021 decreased by 2.7%. In 2022, fentanyl was involved in 75.7% of all drug overdose deaths.

**Total Number of Fatal Fentanyl Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year

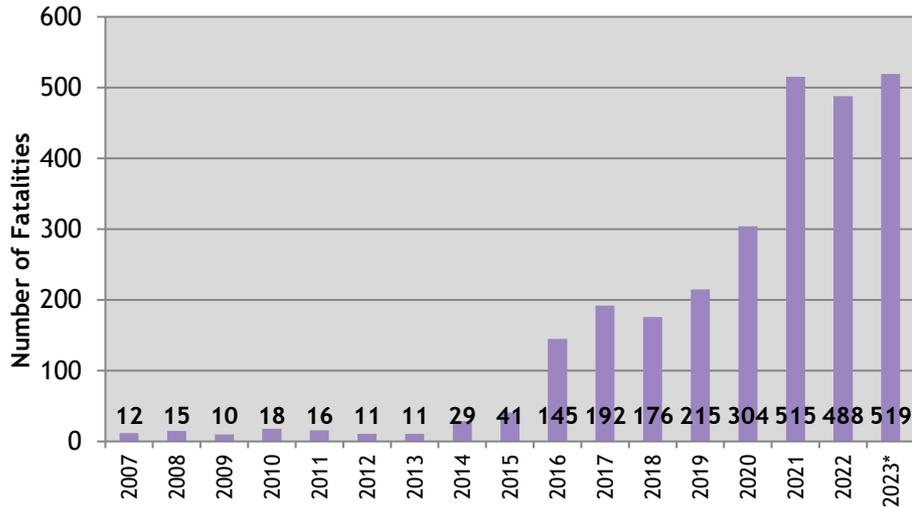


<sup>1</sup> Historically, fentanyl has been categorized as a prescription opioid because it is mass produced by pharmaceutical companies. However, law enforcement investigations and toxicology results have demonstrated that several recent fentanyl seizures have **not** been pharmaceutically produced, but illicitly produced. This illicit form of fentanyl is produced by international drug traffickers who import the drug into the United States and often, mix it into heroin being sold. This illicitly produced fentanyl has been the biggest contributor to the significant increase in the number of fatal opioid overdoses in Virginia.

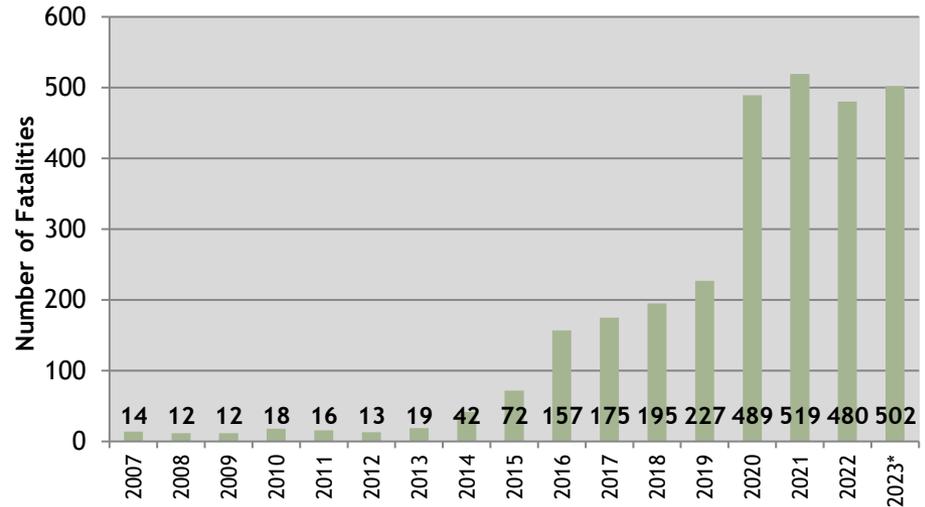
<sup>2</sup> Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

# FENTANYL

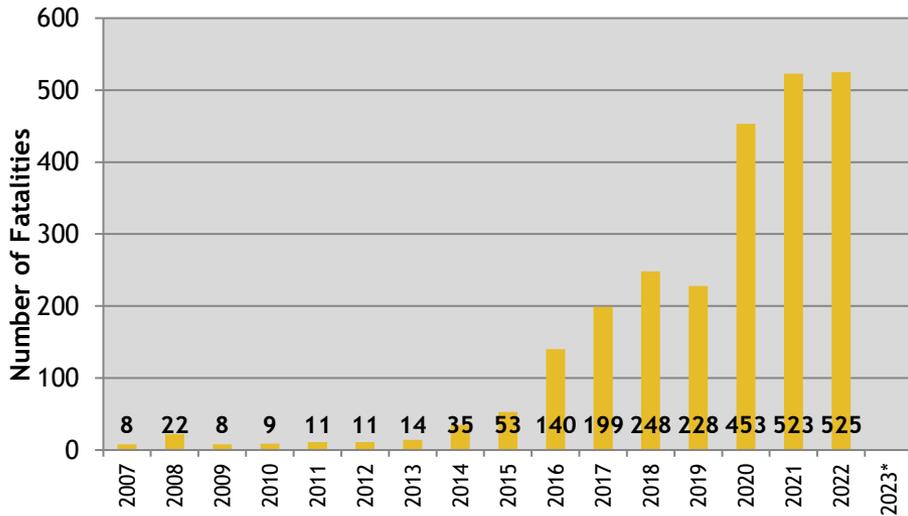
First Quarter, 2007-2023\*



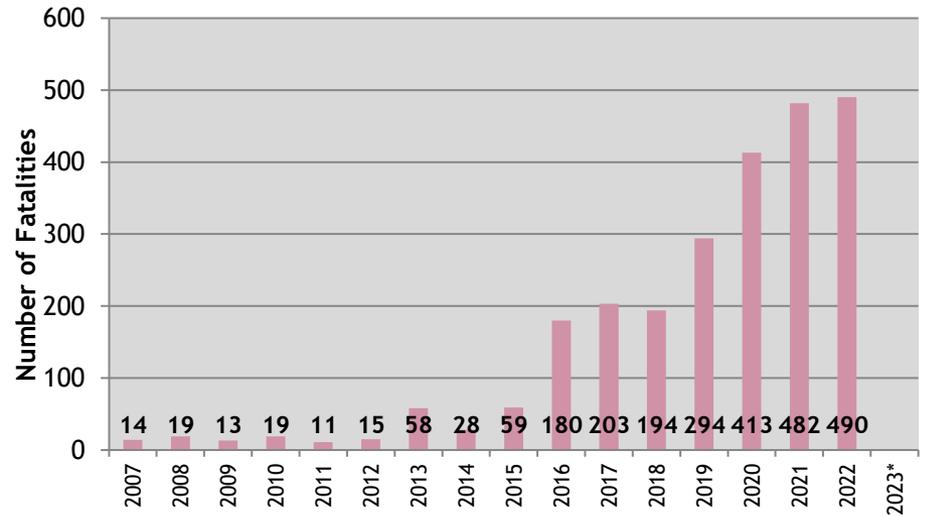
Second Quarter, 2007-2023\*



Third Quarter, 2007-2023\*



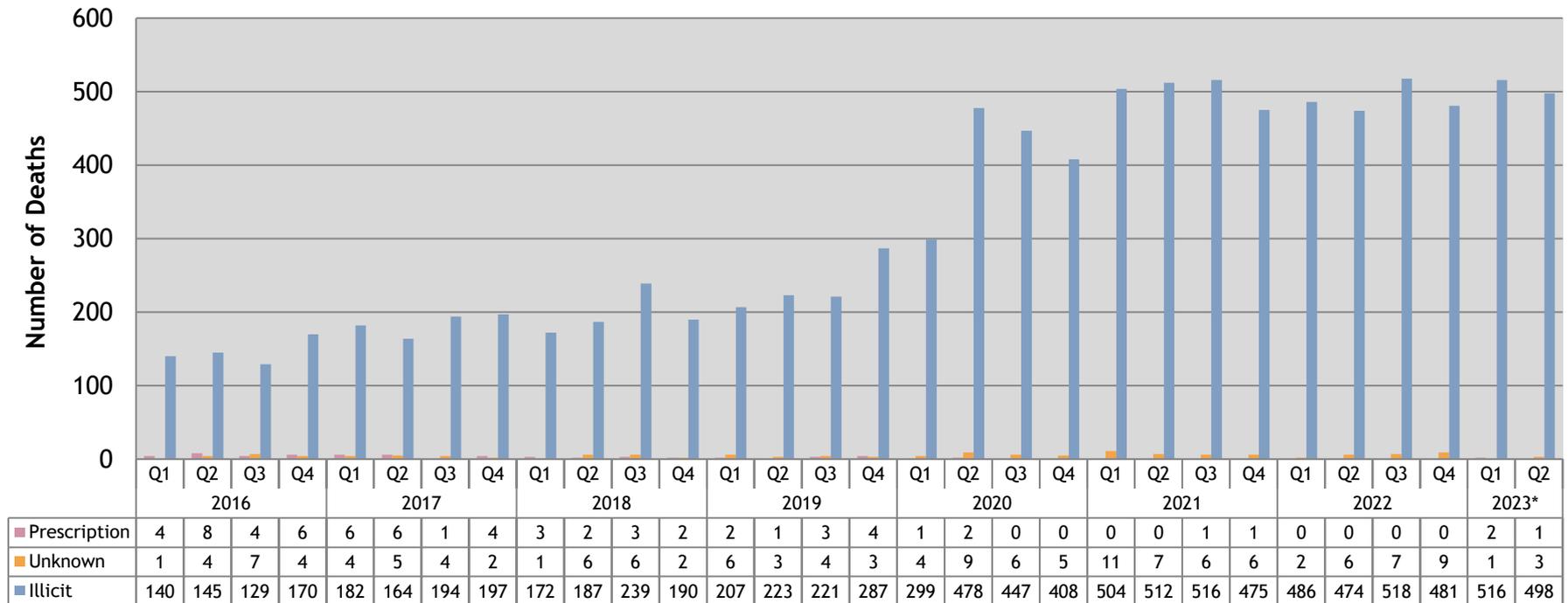
Fourth Quarter, 2007-2023\*



# FENTANYL

In 2016, the OCME began collecting information on the suspected origin of fentanyl (pharmaceutical production, illicit production, or unknown) on all fatal overdoses involving fentanyl. The determination is made by reviewing the examination report, toxicology report, police report, and several other sources of information collected during the death investigation process. This classification is more subjective than objective, but still provides detailed insight to the current proportion of illicitly produced fentanyl in Virginia that is contributing to fatal overdoses. In 2022, it was estimated that nearly 99% of fatal fentanyl overdoses were due to the illicitly produced versions of the drug.

**Total Number of Fatal Fentanyl Overdoses by Fentanyl Origin and Month of of Death, 2016-2023\***



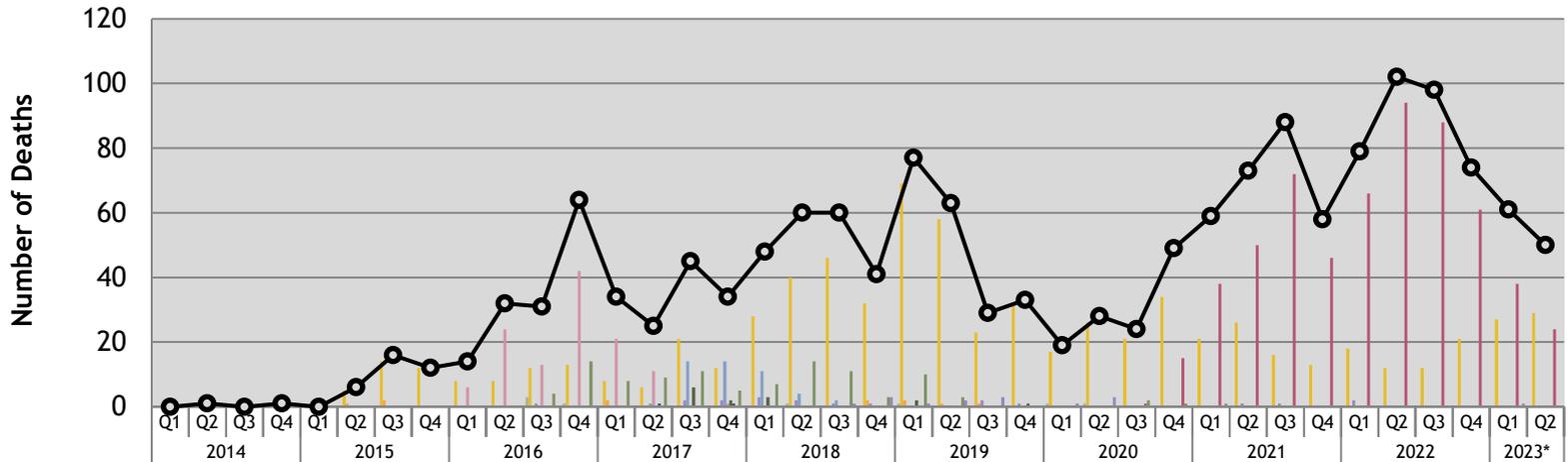
<sup>1</sup> Historically, fentanyl has been categorized as a prescription opioid because it is mass produced by pharmaceutical companies. However, recent law enforcement investigations and toxicology results have demonstrated that several recent fentanyl seizures have **not** been pharmaceutically produced, but illicitly produced. This illicit form of fentanyl is produced by international drug traffickers who import the drug into the United States and often, mix it into heroin being sold. This illicitly produced fentanyl has been the biggest contributor to the significant increase in the number of fatal opioid overdoses in Virginia.

<sup>2</sup> Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

# FENTANYL ANALOGS

Fentanyl analogs are a category of illicitly produced opioids very similar to fentanyl, but slightly different in their chemical structure. Fentanyl analogs began appearing in Virginia in 2014 and have fluctuated ever since. Fentanyl analogs are illicitly produced and vary in potency, and in part, attributed to the rise in fatal overdoses due to opioids. For statistical purposes, 'fentanyl' includes all pharmaceutically produced fentanyl, illicitly produced fentanyl, and fentanyl analogs.

**Total Number of Fatal Fentanyl Analog Overdoses by Quarter and Year of Death, 2014-2023\***

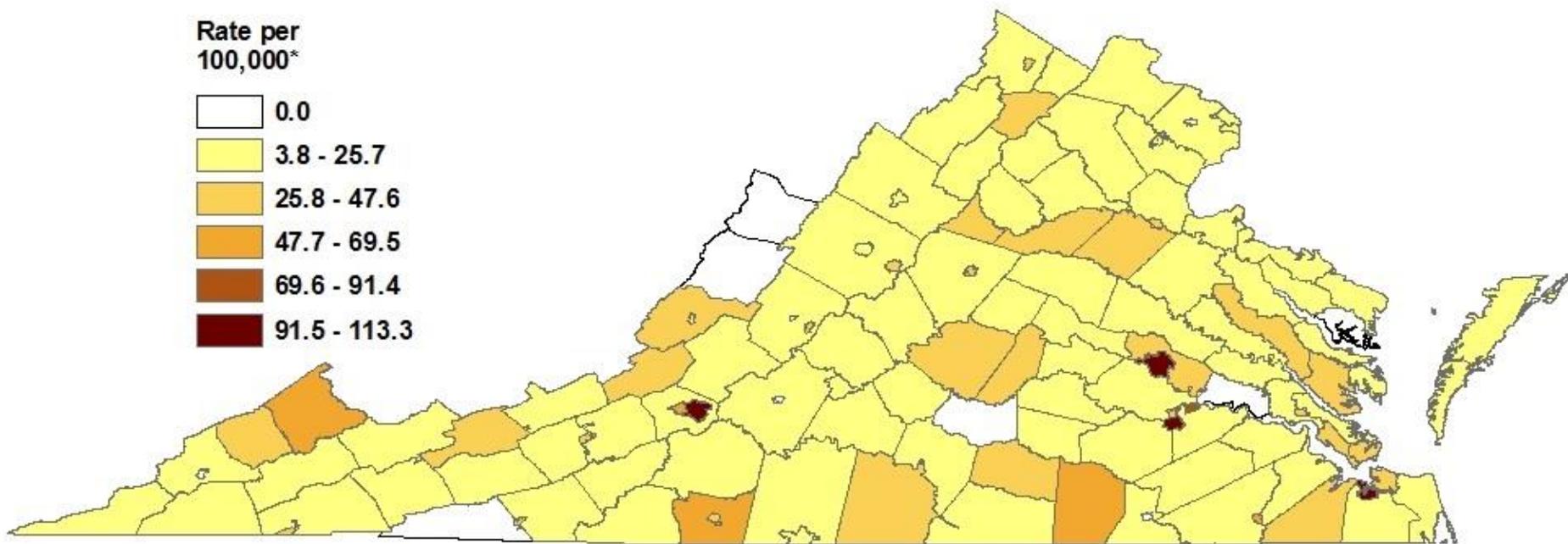


	2014				2015				2016				2017				2018				2019				2020				2021				2022				2023*			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2						
3-Methyl Fentanyl	0	0	0	0	0	0	0	0	0	0	3	1	0	0	0	0	0	1	0	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0						
Acetyl Fentanyl	0	1	0	1	0	5	14	12	8	8	12	13	8	6	21	12	28	40	46	32	69	58	23	32	17	26	21	34	21	26	16	13	18	12	12	21	27	29		
Butyryl Fentanyl	0	0	0	0	0	1	2	0	0	0	0	0	2	0	0	0	0	0	0	2	2	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Carfentanil	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2	2	3	2	1	1	0	0	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Cyclopropyl Fentanyl	0	0	0	0	0	0	0	0	0	0	0	0	1	14	14	11	4	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Furanyl Fentanyl	0	0	0	0	0	0	0	0	6	24	13	42	21	11	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Methoxyacetyl Fentanyl	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	2	3	0	0	2	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Para/Meta-fluorobutyrylfentanyl	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Para/Meta-fluorofentanyl	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	15	38	50	72	46	66	94	88	61	38	24
Para/Meta-fluoroisobutyrylfentanyl	0	0	0	0	0	0	0	0	0	0	4	14	8	9	11	5	7	14	11	3	10	3	0	0	0	0	2	1	0	0	0	0	0	0	0	0	0	0		
Valeryl fentanyl	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	1	2	3	0	1	3	0	0	1	0	0	0	0	0	0	0	0	1	0	
Total Fentanyl Analog Fatalities	0	1	0	1	0	6	16	12	14	32	31	64	34	25	45	34	48	60	60	41	77	63	29	33	19	28	24	49	59	73	88	58	79	102	98	74	61	50		

<sup>1</sup> Each fentanyl analog is tallied by each time it caused or contributed to death (analyzed from either toxicology or the cause of death statement) and therefore the total number of analogs will exceed the actual number of fatalities

\*\*\*New\*\*\* <sup>2</sup> Previous reports combined para/meta-fluorobutyrylfentanyl, para/meta-fluorofentanyl, and para/meta-fluoroisobutyrylfentanyl analogs into one overarching category of para/meta-fluoroisobutyrylfentanyl. From this report on, these compounds will be reported separately.

## Rate of Fatal Fentanyl (Rx, Illicit, and Analog) Overdoses by Locality of Overdose, 2022



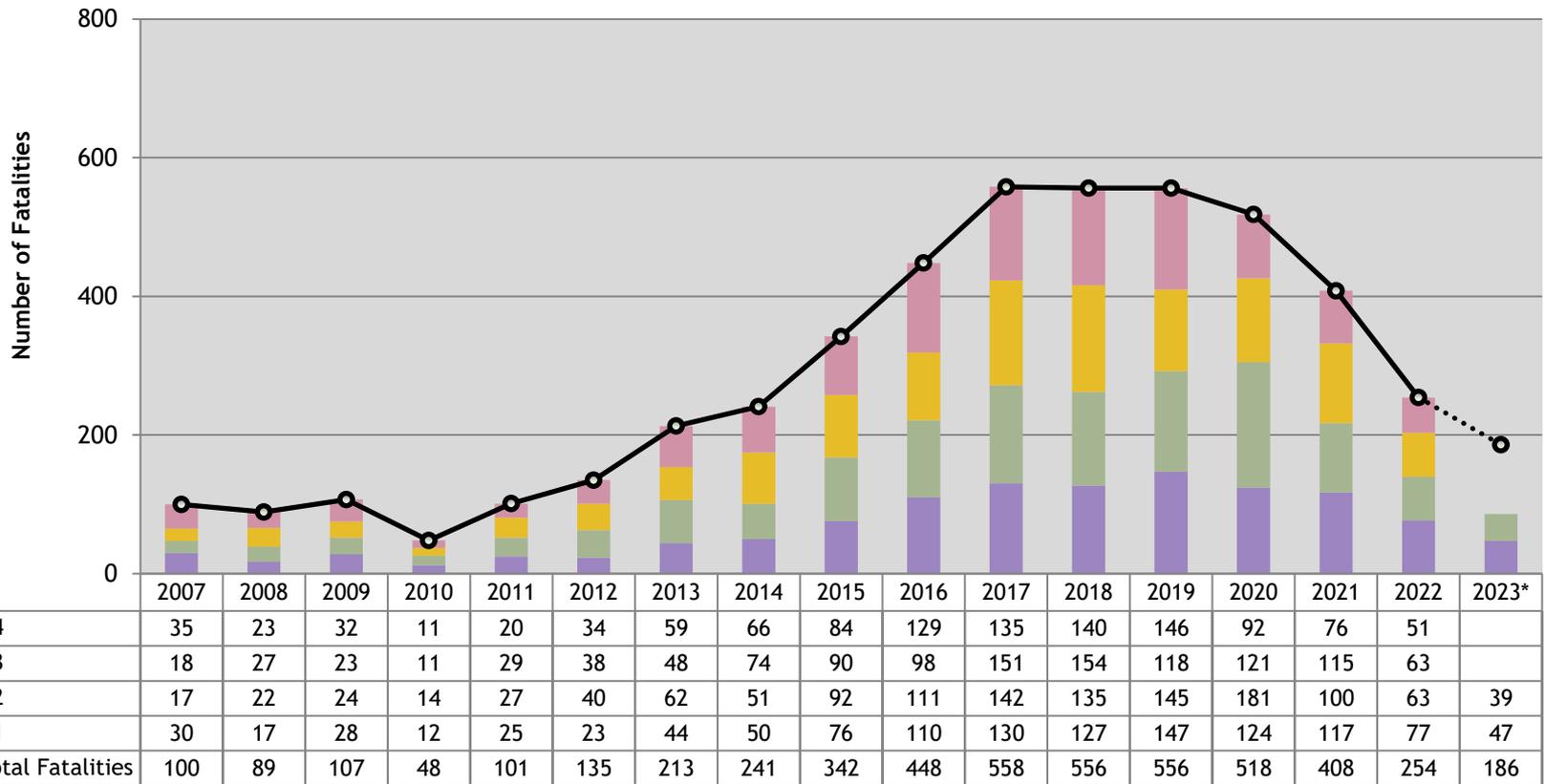
Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# HEROIN

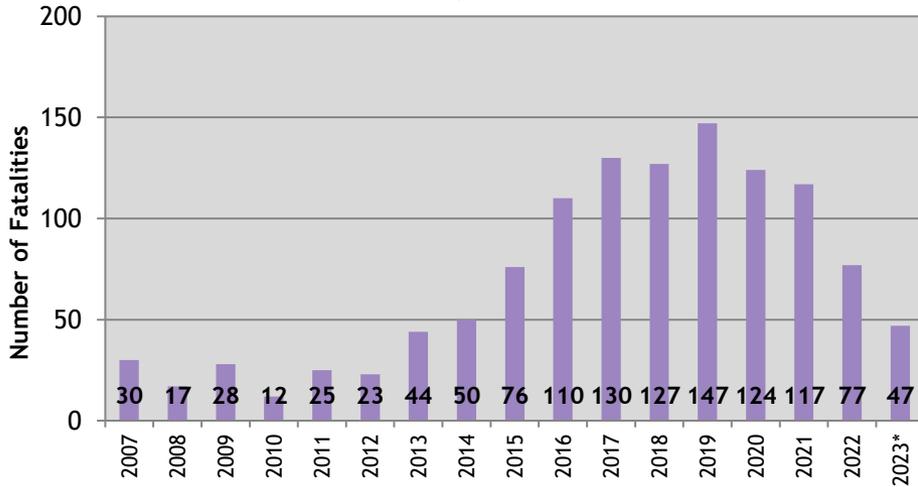
The total number of fatal heroin-related overdoses began increasing in 2010. Fatal heroin overdoses often occurred as the primary drug causing death, but more recently, heroin and fentanyl and/or fentanyl analog combinations caused a large portion of fatal drug overdoses. The annual number of fatal heroin overdoses in 2017-2019 were nearly identical, but began to decrease in 2020-2022. Heroin overdose deaths decreased by 37.7% in 2022 compared to 2021.

**Total Number of Fatal Heroin Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year

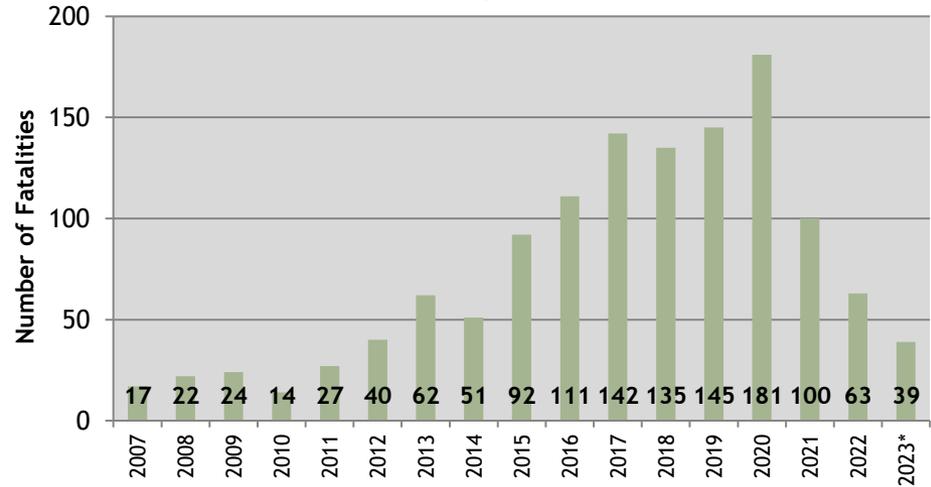


# HEROIN

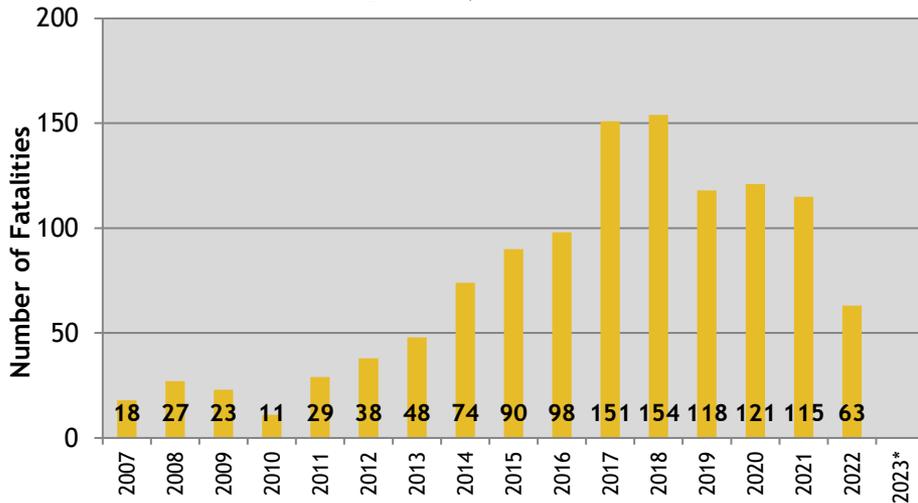
First Quarter, 2007-2023\*



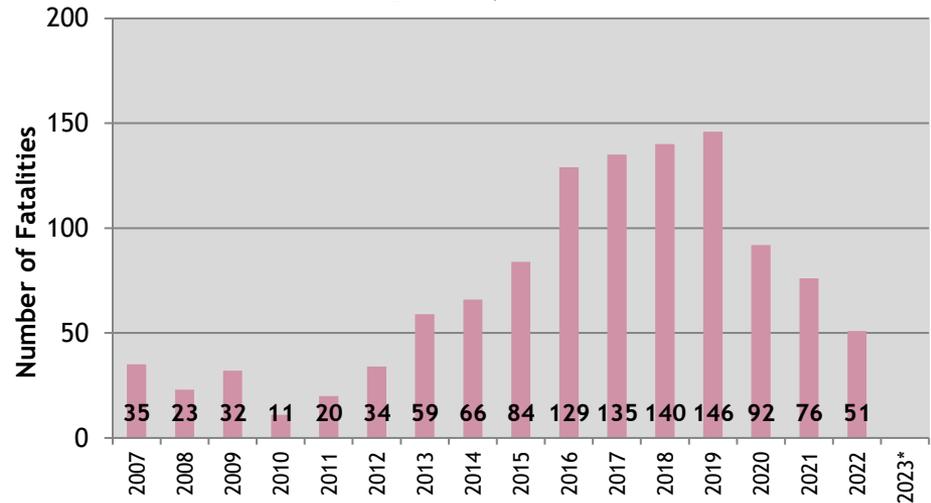
Second Quarter, 2007-2023\*



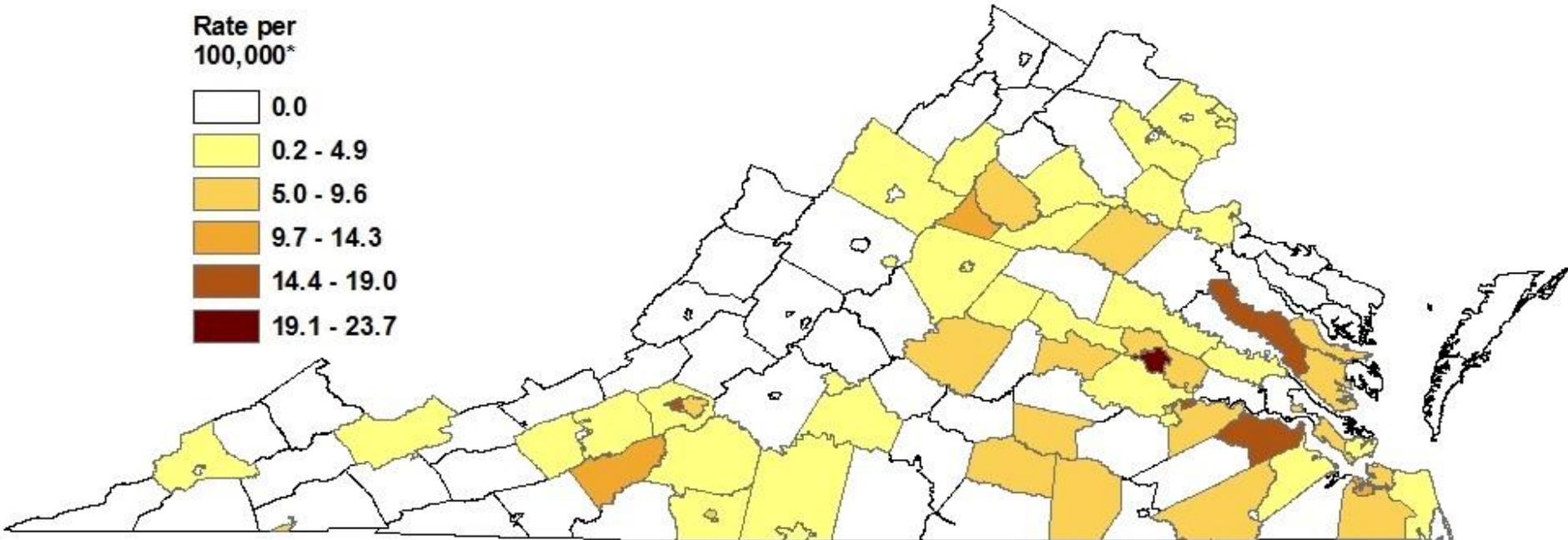
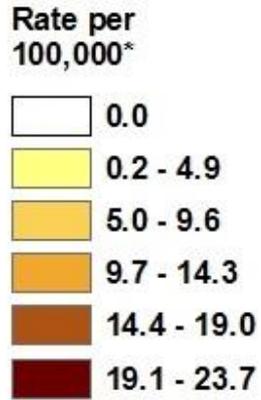
Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*



## Rate of Fatal Heroin Overdoses by Locality of Overdose, 2022



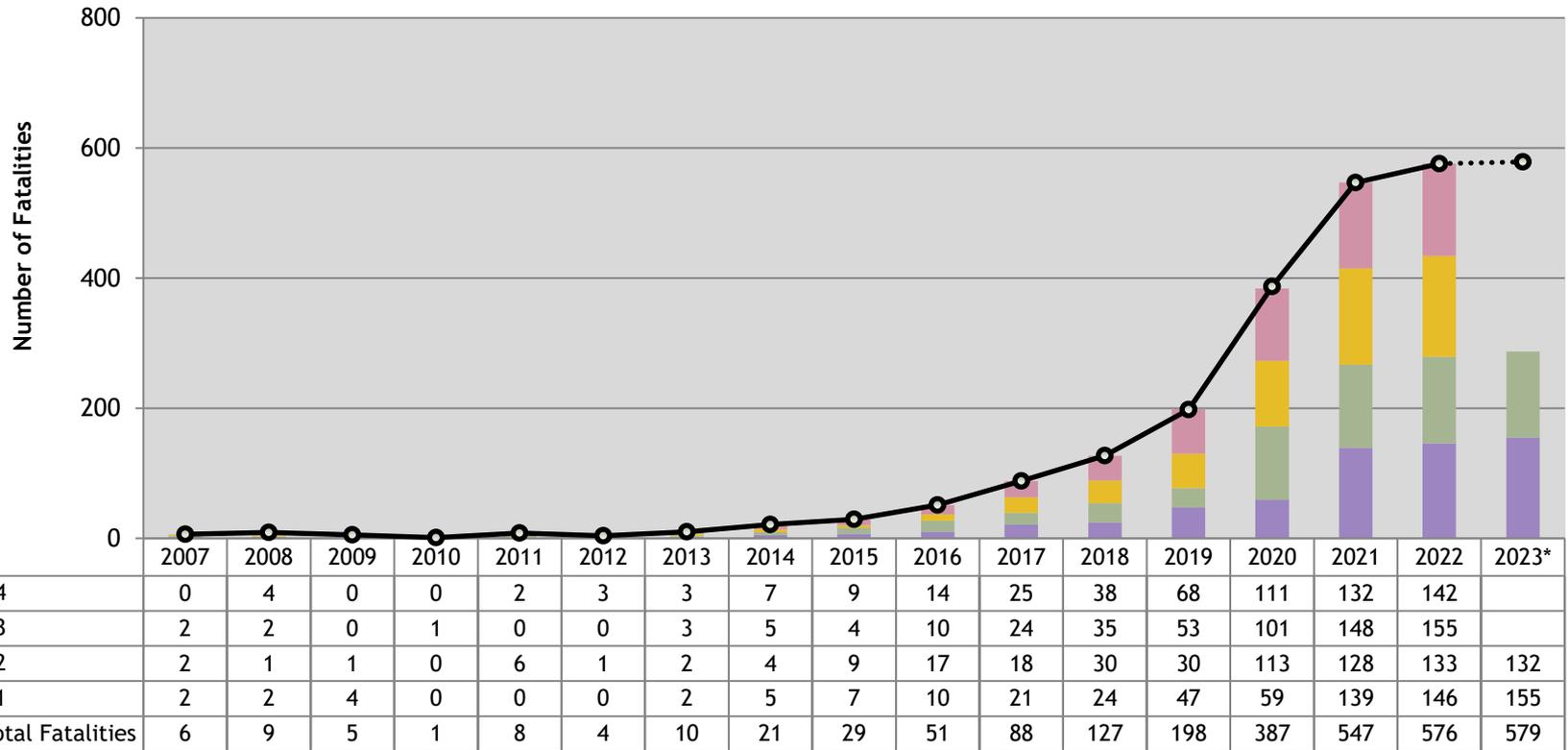
Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# METHAMPHETAMINE

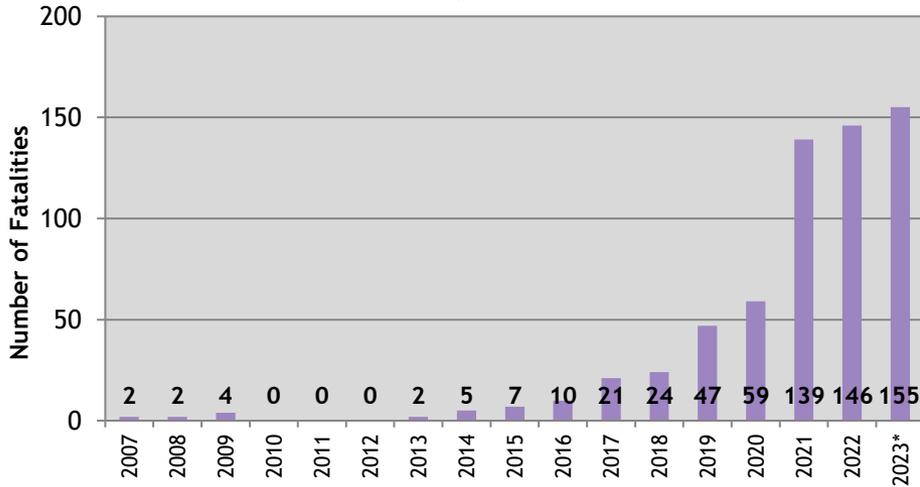
From 2007 to 2014, fatal methamphetamine overdoses were relatively uncommon compared to other drugs/drug categories, but in 2014, the number of fatal methamphetamine overdoses began to increase. In 2022, fatal methamphetamine overdoses most frequently had fentanyl (prescription, illicit, and/or analogs) causing or contributing to death (73.3%). The preliminary number of fatal methamphetamine overdoses increased by 5.3% in 2022 when compared to 2021.

**Total Number of Fatal Methamphetamine Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year

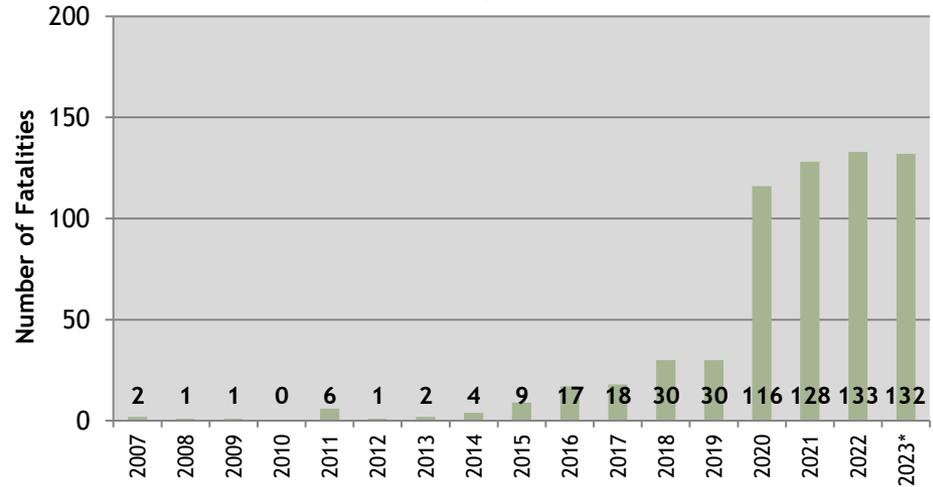


# METHAMPHETAMINE

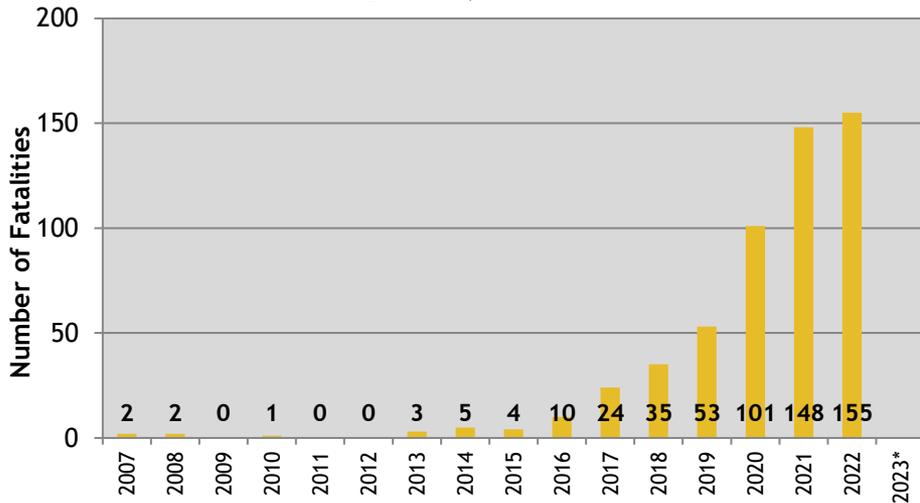
First Quarter, 2007-2023\*



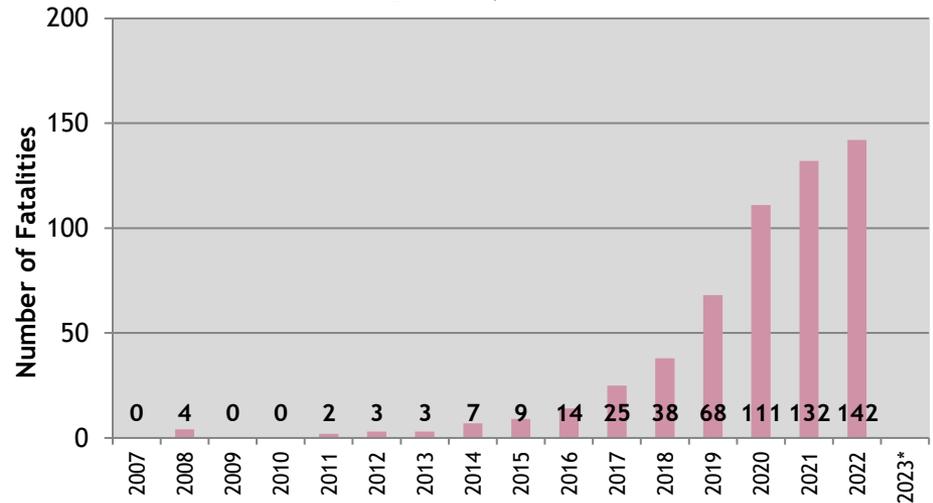
Second Quarter, 2007-2023\*



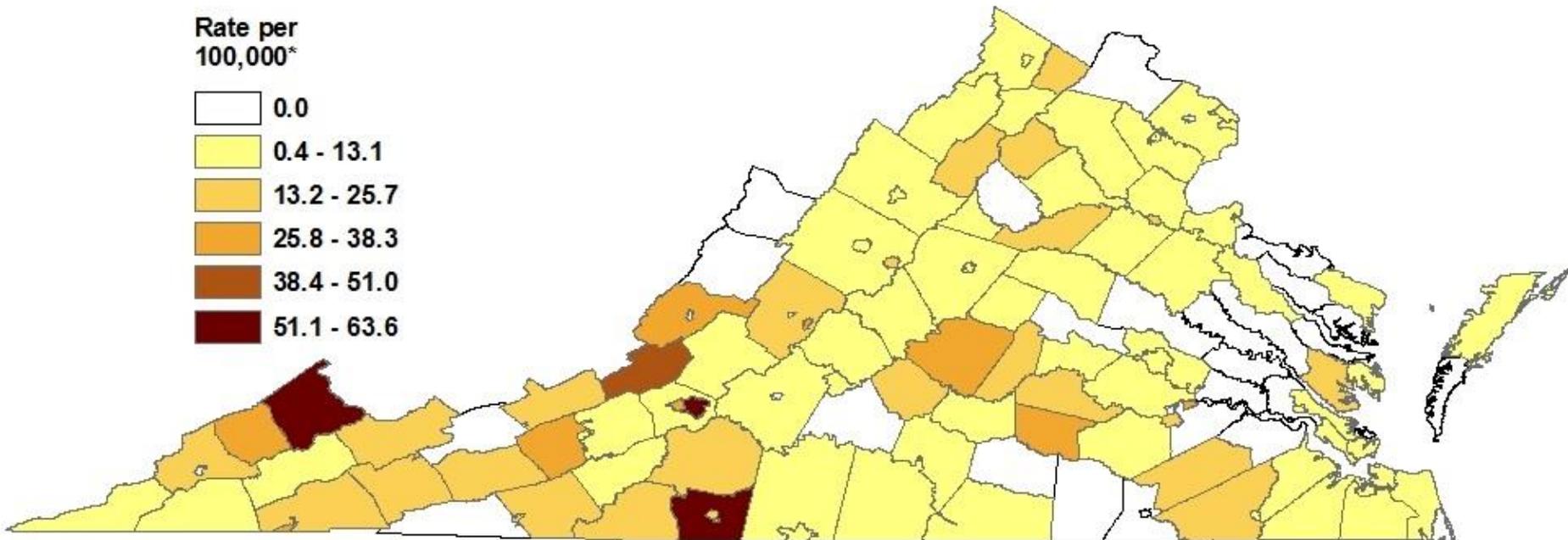
Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*



## Rate of Fatal Methamphetamine Overdoses by Locality of Overdose, 2022



Source: Virginia Department of Health, Office of the Chief Medical Examiner

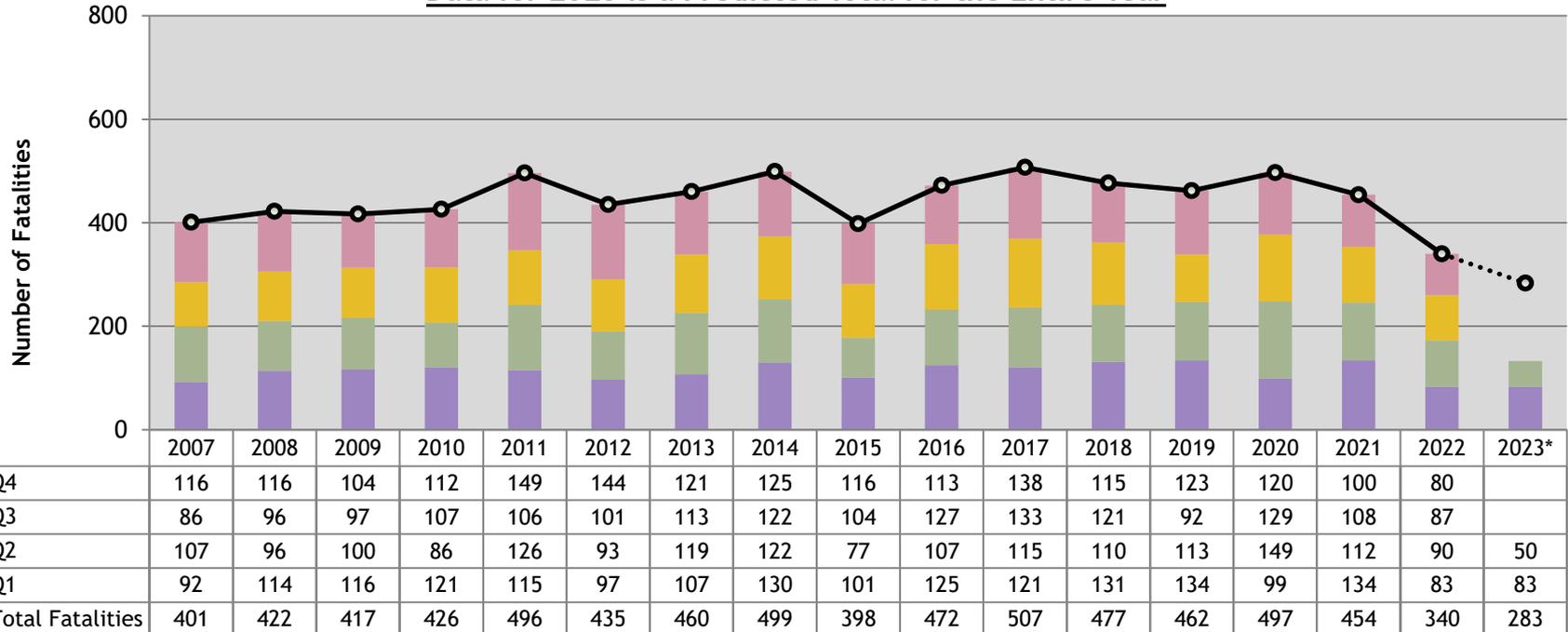
\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# PRESCRIPTION OPIOIDS (EXCLUDING FENTANYL)

Since 2007, fatal prescription (Rx) opioid overdoses have been the leading category of drugs causing or contributing to death in the Commonwealth, with historically, oxycodone being the most common drug. Given the transition in fatal fentanyl overdoses from pharmaceutically produced fentanyl (2007-2014) to nearly all illicitly produced fentanyl (2015-present), fentanyl needs to be removed from the Rx opioid category and analyzed separately. This allows one to see the significant impact the drug is having on fatal overdose numbers in Virginia. By removing fentanyl from this Rx category, it is to be expected that Rx opioid fatalities from 2007-2013 to be slightly undercounted because true Rx fentanyl overdoses are excluded and combined with all 'fentanyl' to capture recent trends of illicit fentanyl in Virginia.

**Total Number of Fatal Prescription Opioid Overdoses (Excluding Fentanyl) by Quarter and Year of Death, 2007-2023\***

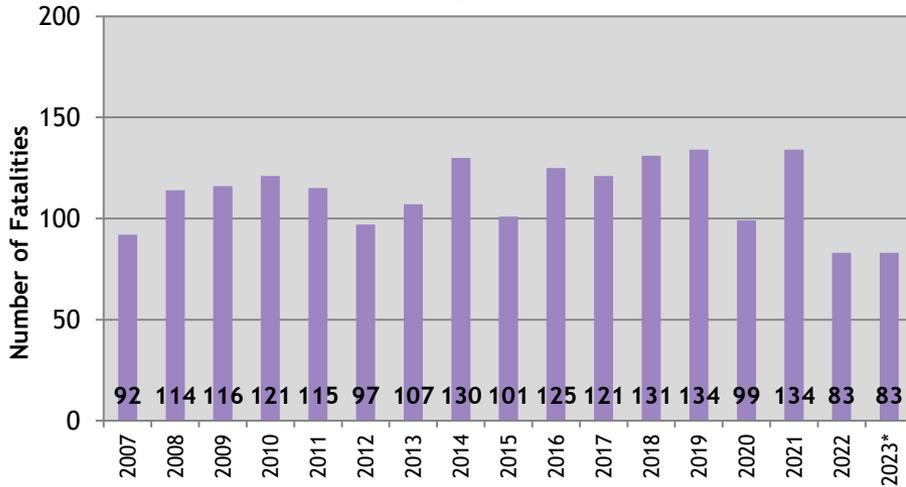
**Data for 2023 is a Predicted Total for the Entire Year**



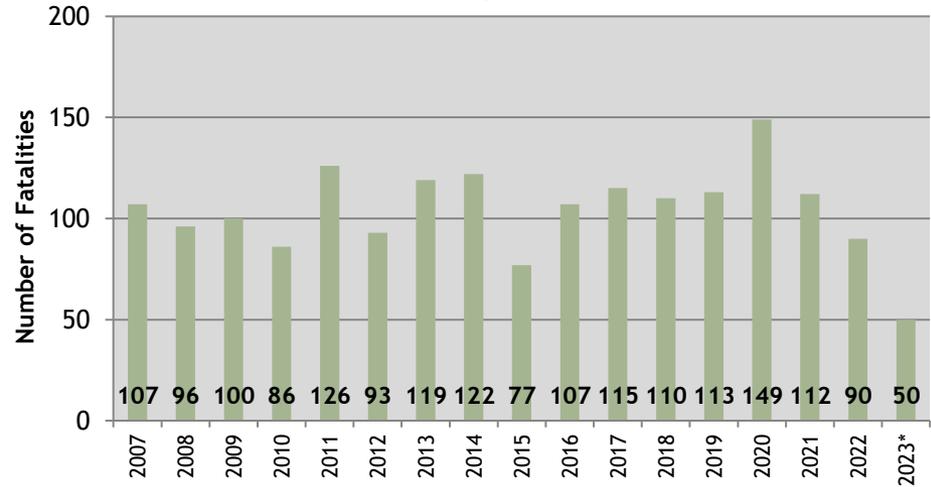
<sup>1</sup> 'Prescription Opioids (excluding fentanyl)' calculates all deaths in which one or more prescription opioids caused or contributed to death, but excludes fentanyl from the **required list** of prescription opioid drugs used to calculate the numbers. However, given that some of these deaths have multiple drugs on board, some deaths may have fentanyl in addition to other prescriptions opioids, and are therefore counted in the total number. Analysis must be done this way because by excluding all deaths in which fentanyl caused or contributed to death, the calculation would also exclude other prescription opioid deaths (oxycodone, methadone, etc.) from the analysis and would thereby undercount the actual number of fatalities due to these true prescription opioids.

# PRESCRIPTION OPIOIDS (EXCLUDING FENTANYL)

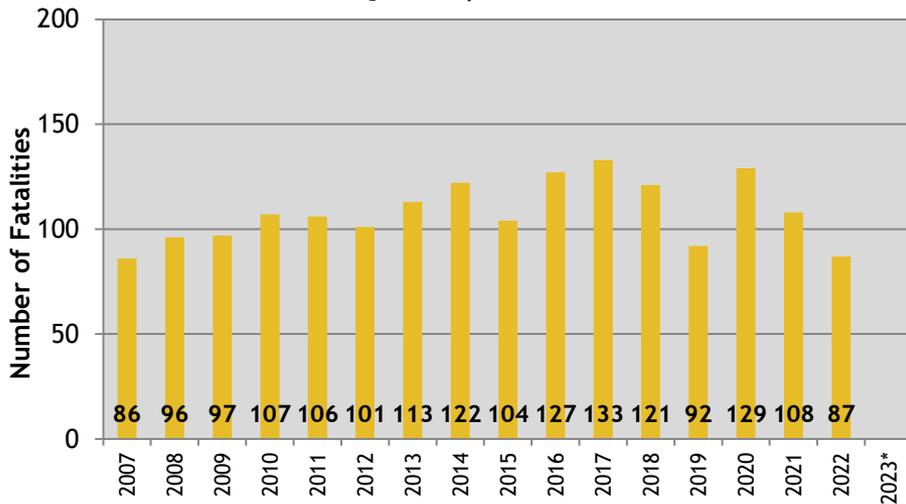
First Quarter, 2007-2023\*



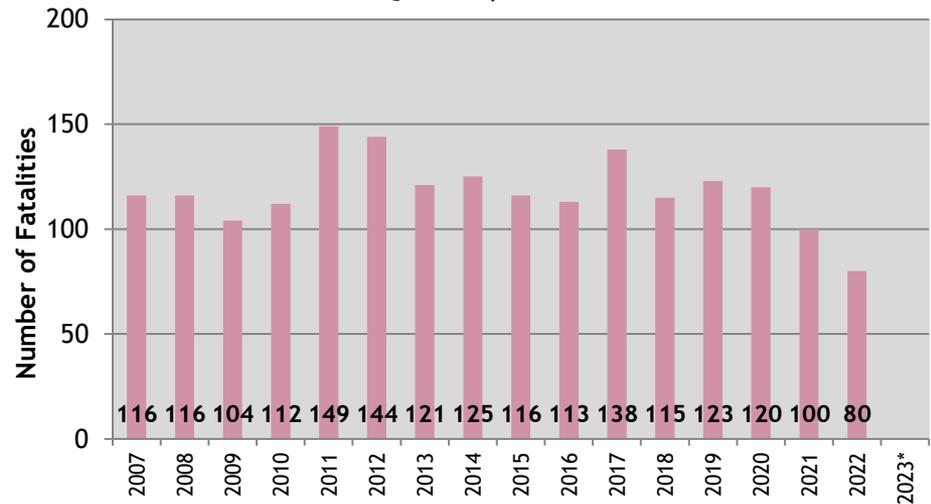
Second Quarter, 2007-2023\*



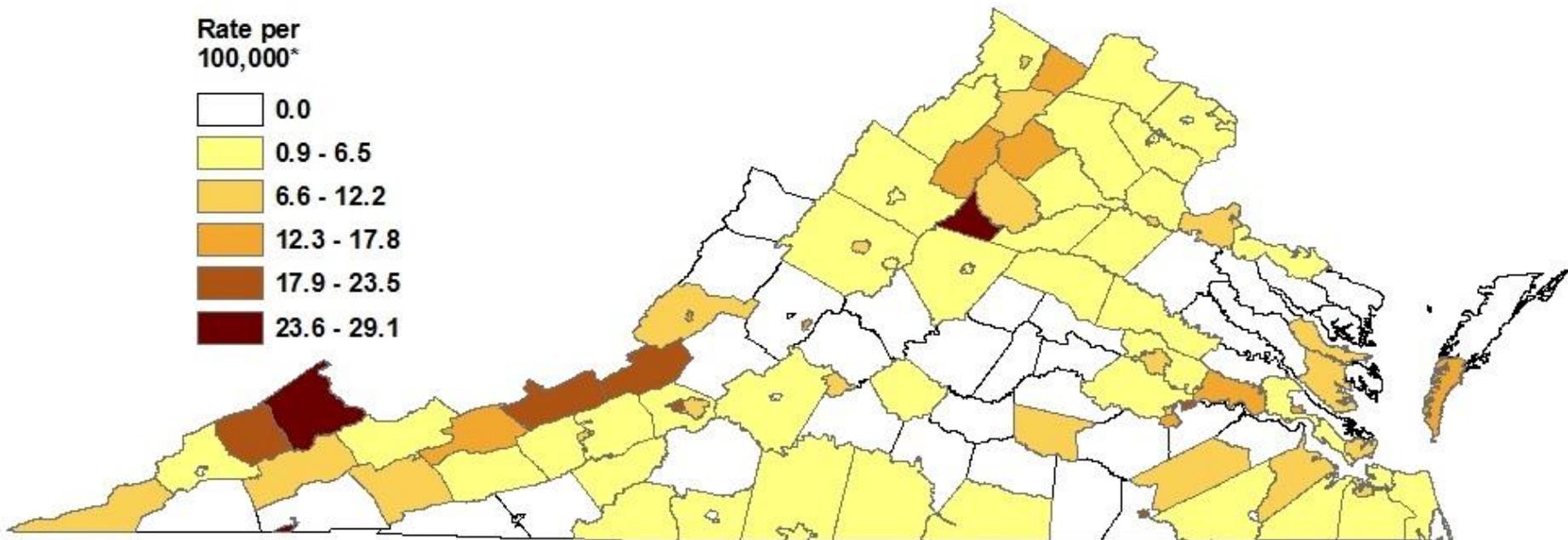
Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*



## Rate of Fatal Rx Opioid Overdoses by Locality of Overdose, 2022



Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# FATAL DRUG OVERDOSES OF SPECIAL INTEREST

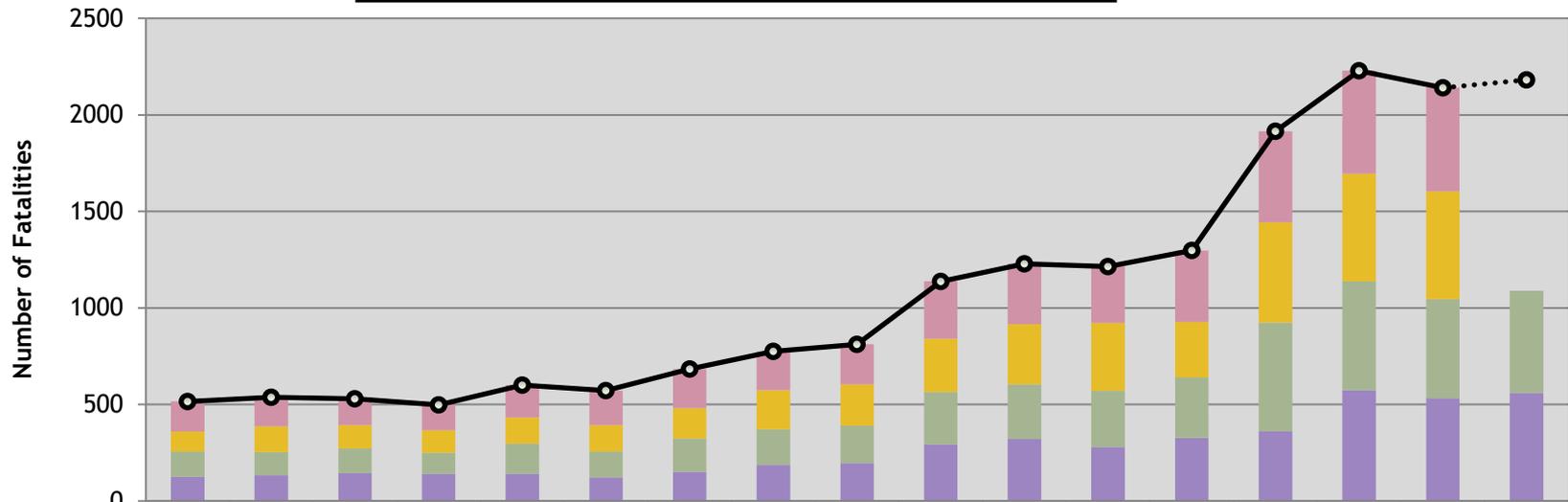


- All Opioids (Fentanyl, Heroin, and/or Prescription Opioids)
- Heroin and/or Fentanyl

# ALL OPIOIDS

From 2007-2015, opioids (fentanyl, heroin, U-47700, and/or one or more prescription opioids) made up approximately 75% of all fatal drug overdoses annually in Virginia. However, this percentage is increasing each year due to the significant increase in fatal fentanyl and/or heroin overdoses which began in late 2013 and early 2014. In 2022, 81.7% of all fatal overdoses of any substance, were due to one or more opioids. The number of fatal opioid overdoses in 2022 decreased 3.9% from the previous year.

**Total Number of Fatal Opioid Overdoses by Quarter and Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
Q4	156	151	136	131	168	179	202	201	208	298	312	292	371	472	534	537	
Q3	104	134	122	116	136	137	158	202	213	275	312	351	286	519	557	558	
Q2	130	120	128	109	156	134	173	185	195	272	284	292	314	564	563	514	528
Q1	126	133	144	142	141	122	151	187	196	293	321	280	327	360	575	532	561
—●— Total Fatalities	516	538	530	498	601	572	684	775	812	1138	1229	1215	1298	1915	2229	2141	2181

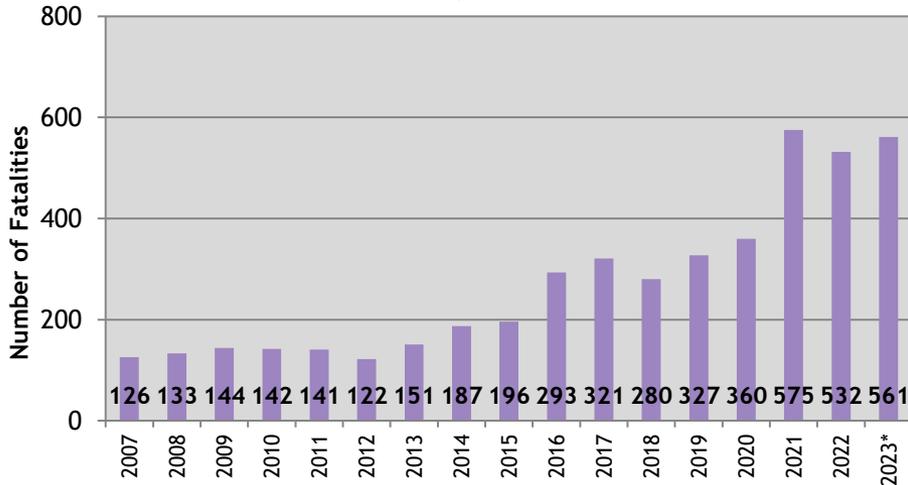
<sup>1</sup> 'All Opioids' include all versions of fentanyl, heroin, prescription opioids, U-47700, and opioids unspecified

<sup>2</sup> 'Opioids Unspecified' are a small category of deaths in which the determination of heroin and/or one or more prescription opioids cannot be made due to specific circumstances of the death. Most commonly, these circumstances are a result of death several days after an overdose, in which the OCME cannot test for toxicology because the substances have been metabolized out of the decedent's system.

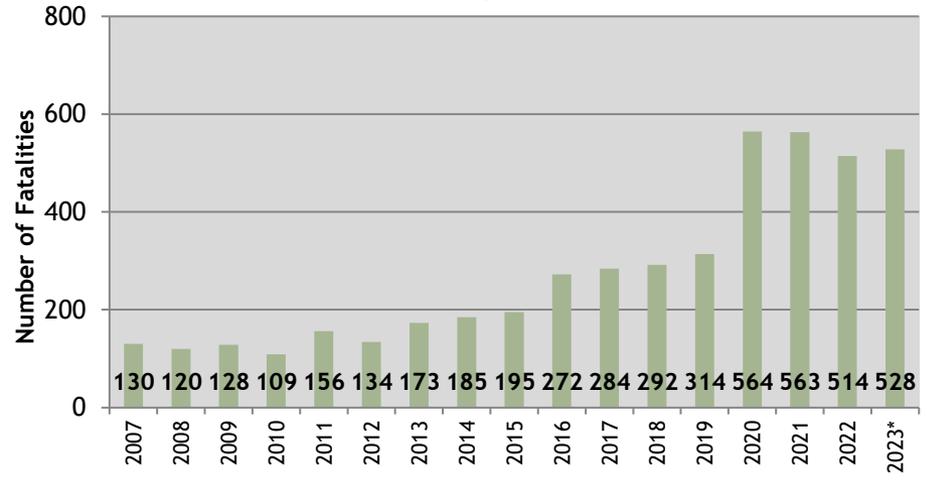
<sup>3</sup> Fatal opioid numbers have changed slightly from past reports due to the removal of fentanyl from the category of prescription opioids, as well as the addition of buprenorphine, levorphanol, meperidine, pentazocine, propoxyphene, and tapentadol added to the list of prescription opioids.

# ALL OPIOIDS

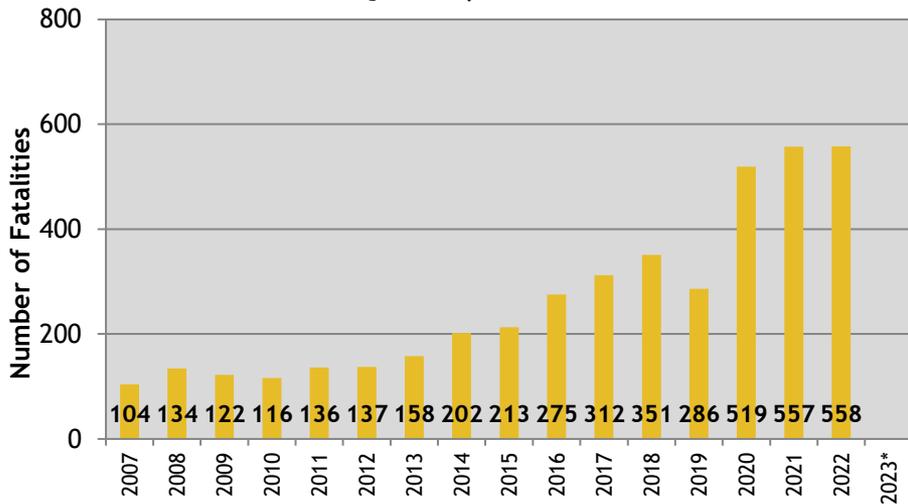
First Quarter, 2007-2023\*



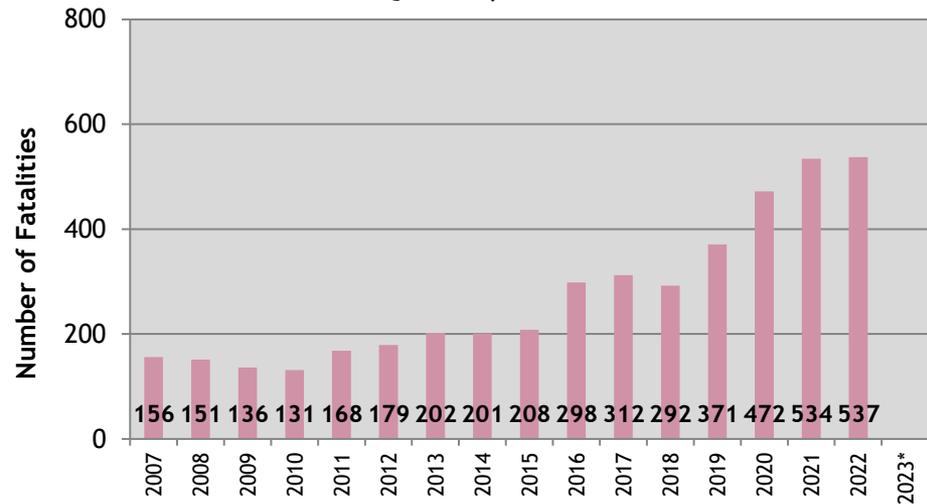
Second Quarter, 2007-2023\*



Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*

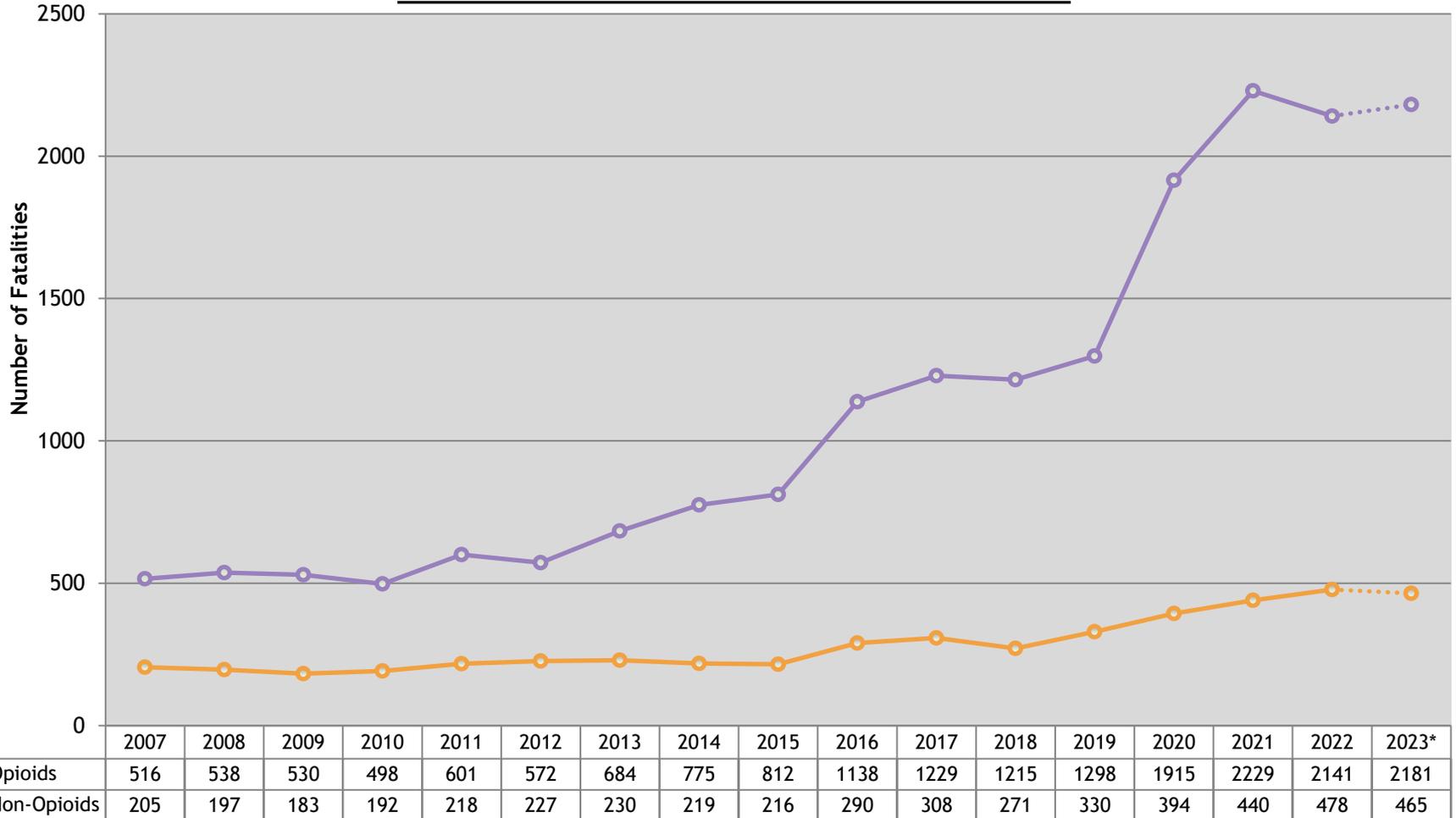


<sup>1</sup> 'All Opioids' include all versions of fentanyl, heroin, prescription opioids, U-47700, and opioids unspecified

<sup>2</sup> 'Opioids Unspecified' are a small category of deaths in which the determination of heroin and/or one or more prescription opioids cannot be made due to specific circumstances of the death. Most commonly, these circumstances are a result of death several days after an overdose, in which the OCME cannot test for toxicology because the substances have been metabolized out of the decedent's system.

# OPIOIDS VS. NON-OPIOIDS

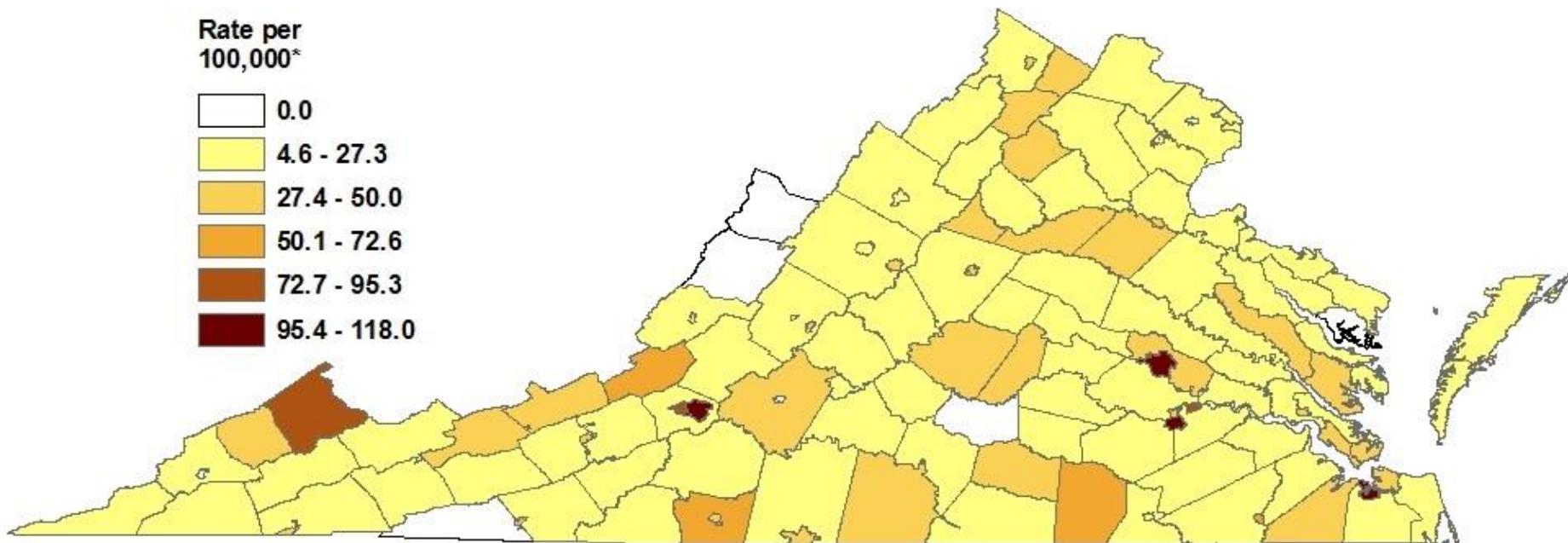
Total Number of Fatal Opioid Overdoses vs. Non-Opioid Overdoses by Year of Death, 2007-2023\*  
Data for 2023 is a Predicted Total for the Entire Year



<sup>1</sup> 'All Opioids' include all versions of fentanyl, heroin, prescription opioids, U-47700, and opioids unspecified

<sup>2</sup> 'Opioids Unspecified' are a small category of deaths in which the determination of heroin and/or one or more prescription opioids cannot be made due to specific circumstances of the death. Most commonly, these circumstances are a result of death several days after an overdose, in which the OCME cannot test for toxicology because the substances have been metabolized out of the decedent's system.

## Rate of All Fatal Opioid Overdoses by Locality of Overdose, 2022



Source: Virginia Department of Health, Office of the Chief Medical Examiner

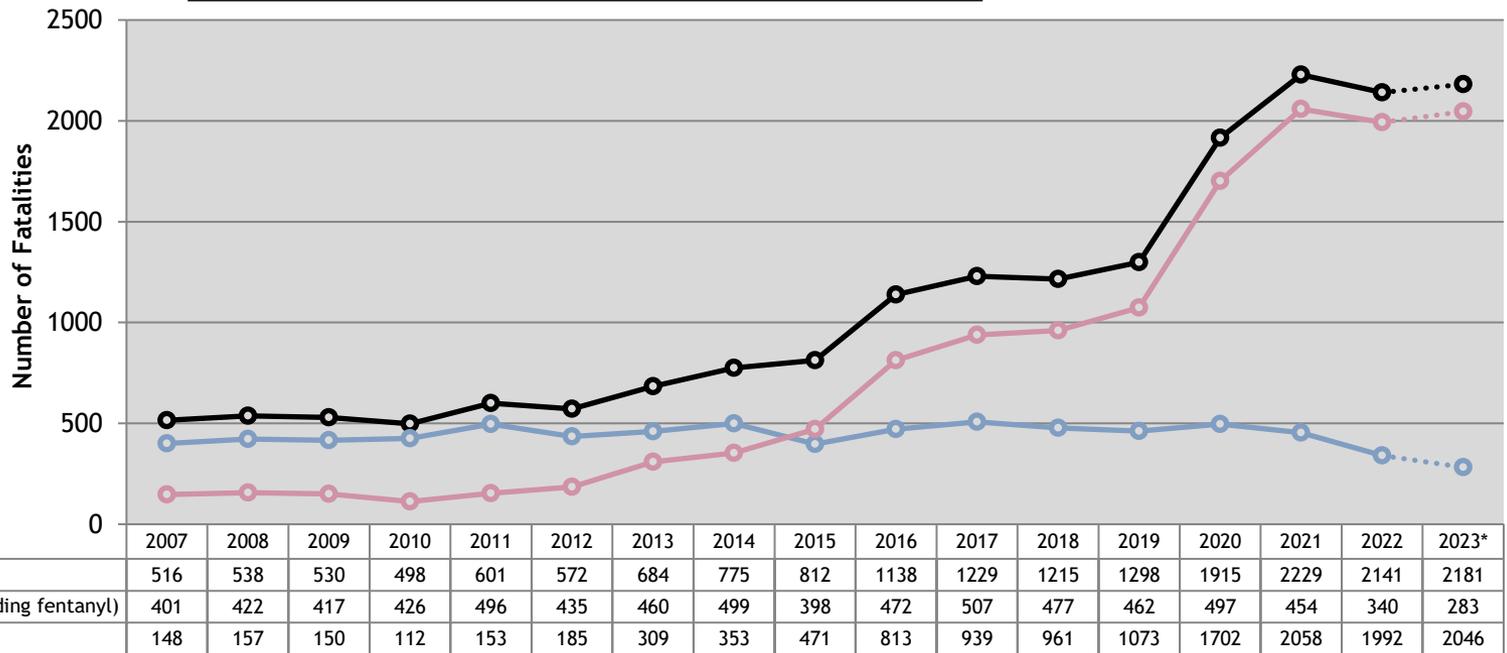
\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# OPIOIDS- A DIFFERENT PERSPECTIVE

Prescription opioids are a group of drugs that are commercially made by pharmaceutical companies in certified laboratories that act upon the opioid receptors in the brain. Historically, fentanyl has been one of these drugs. However, in late 2013, early 2014, illicitly made fentanyl began showing up in Virginia and by 2016, most fatal fentanyl overdoses were of illicit production of the drug. Separating fentanyl from the grouping of prescription opioids for this reason demonstrates a slight decrease in fatal prescription opioid overdoses in 2015 and a dramatic increase in the number of fatal fentanyl and/or heroin overdoses. This has caused the significant rise in all fatal opioid overdoses in the Commonwealth since 2012.

**Total Number of Prescription Opioid (Excluding Fentanyl), Fentanyl and/or Heroin, and All Opioid Overdoses by Year of Death, 2007-2023\***

**Data for 2023 is a Predicted Total for the Entire Year**



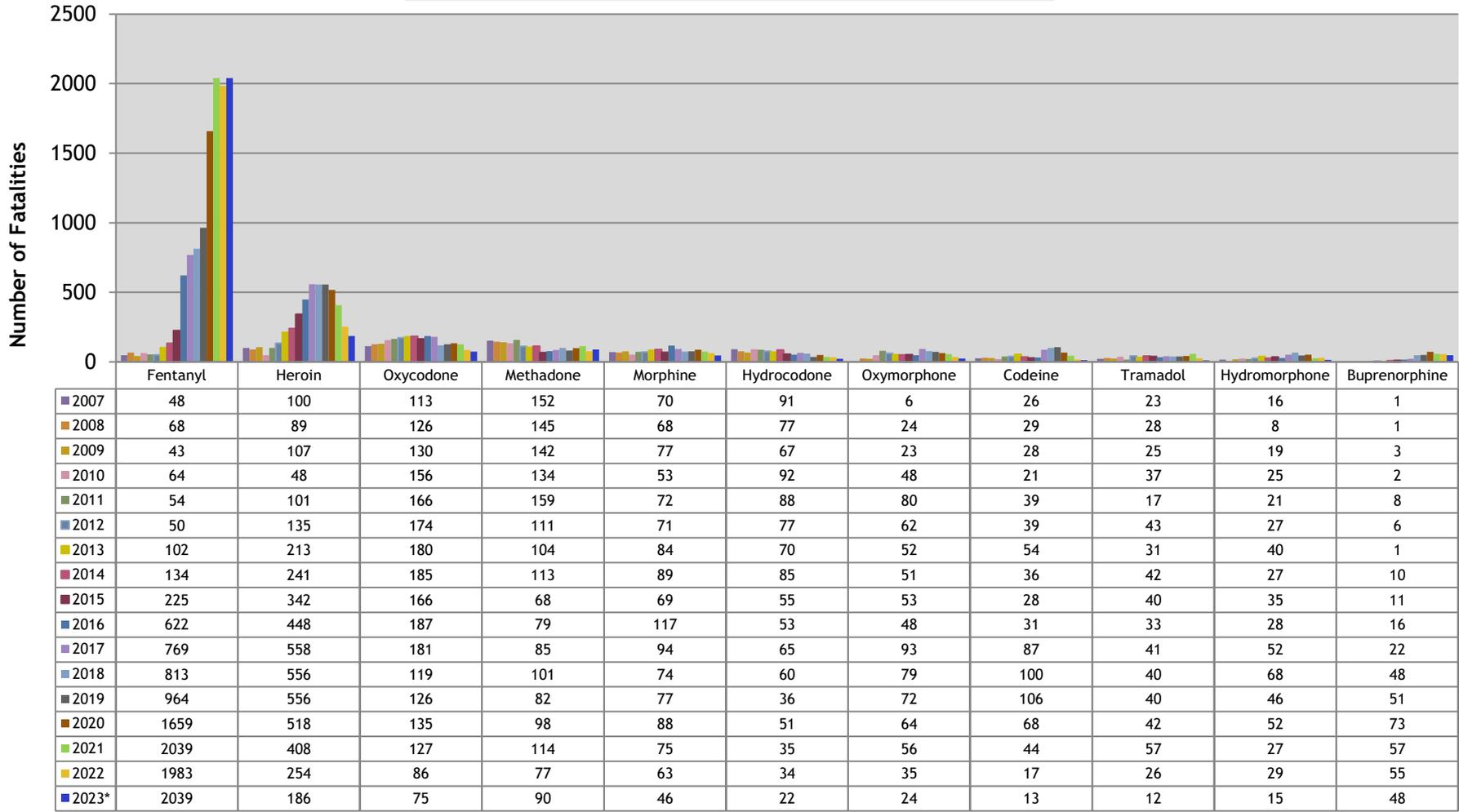
<sup>1</sup> 'All Opioids' include all versions of fentanyl, heroin, prescription opioids, and opioids unspecified

<sup>2</sup> Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

<sup>3</sup> 'Prescription Opioids (excluding fentanyl)' calculates all deaths in which one or more prescription opioids caused or contributed to death, but excludes fentanyl from the **required list** of prescription opioid drugs used to calculate the numbers. However, given that some of these deaths have multiple drugs on board, some deaths may have fentanyl in addition to other prescriptions opioids, and are therefore counted in the total number. Analysis must be done this way because by excluding all deaths in which fentanyl caused or contributed to death, the calculation would also exclude other prescription opioid deaths (oxycodone, methadone, etc.) from the analysis and would thereby undercount the actual number of fatalities due to these true prescription opioids.

# ALL OPIOIDS

Total Number of Fatal Opioid Overdoses by Drug Name and Year of Death, 2007-2023\*  
Data for 2023 is a Predicted Total for the Entire Year



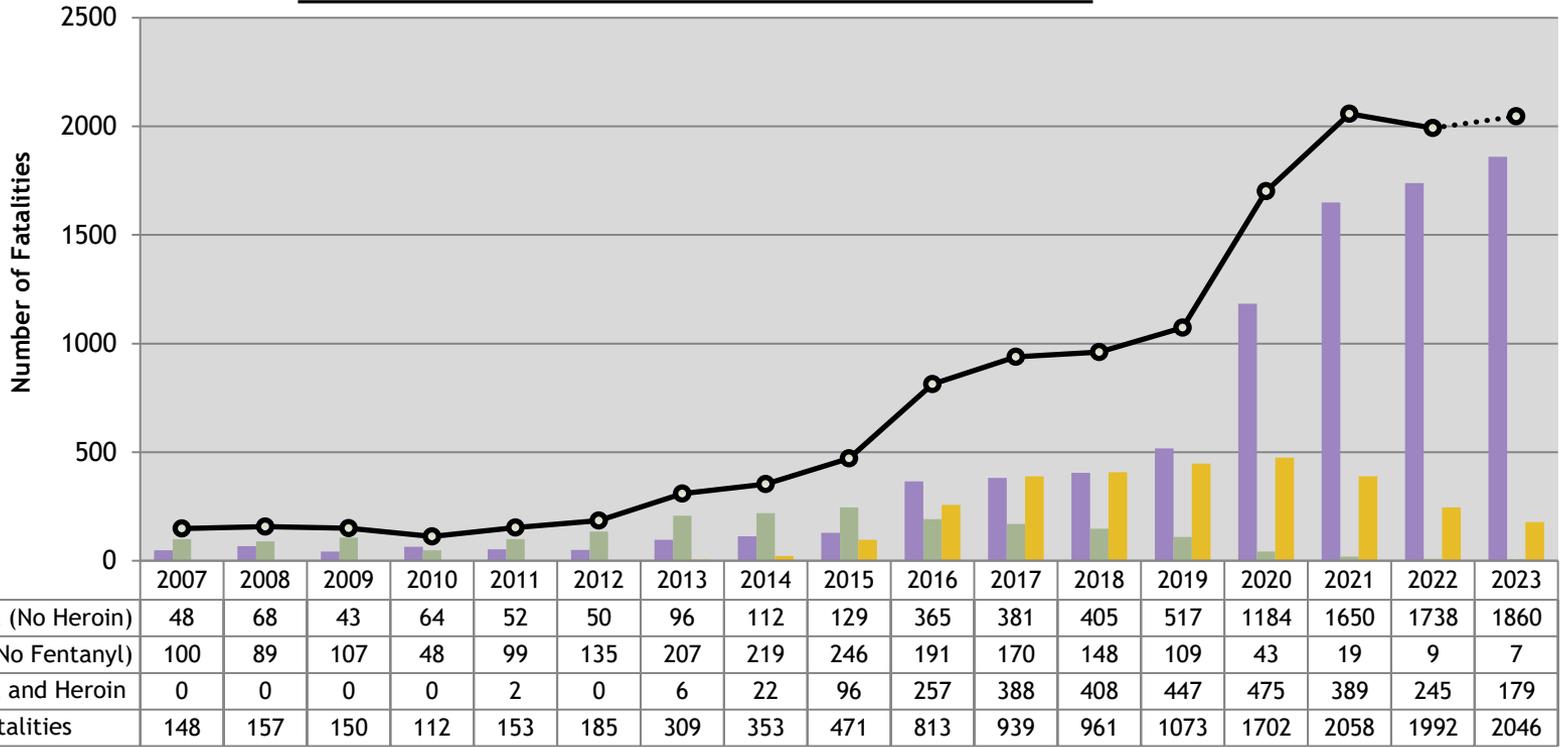
<sup>1</sup> Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

<sup>2</sup> Levorphanol, meperidine, pentazocine, propoxyphene, and tapentadol were excluded from this analysis due low annual case counts (<20 deaths)

# FENTANYL AND/OR HEROIN

The total number of fatal fentanyl and/or heroin overdoses have significantly increased since late 2012. It is important to look at these two drugs together because as heroin became more popular in 2010, fentanyl occasionally began showing up as an additive to the heroin. By late 2013 and early 2014, some heroin being sold on the street was actually completely fentanyl, unbeknownst to the user. It is essential to look at these fentanyl (no heroin), heroin (no fentanyl), and fentanyl and heroin combination deaths together because users never know exactly what is in the illegal drugs purchased off the streets. The numbers of fatal fentanyl and/or heroin overdoses decreased 3.2% in 2022 compared to 2021.

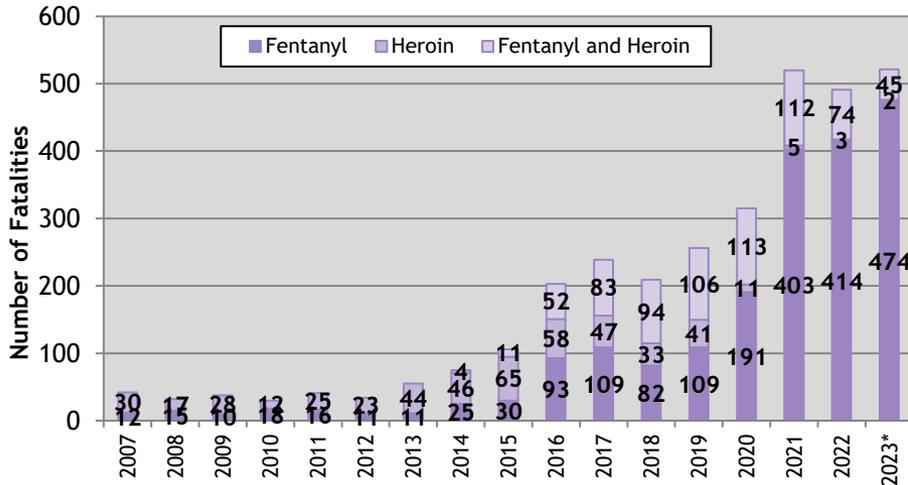
**Total Number of Fatal Fentanyl and/or Heroin Overdoses by Year of Death, 2007-2023\***  
Data for 2023 is a Predicted Total for the Entire Year



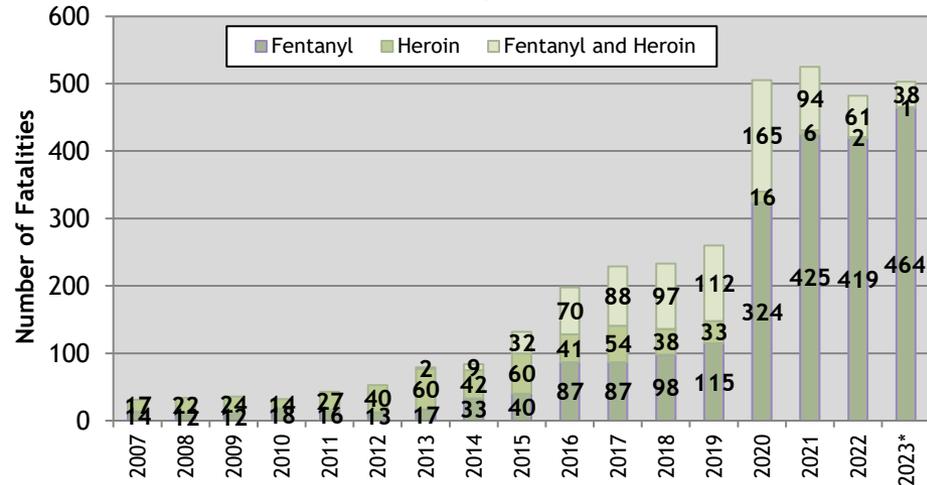
\* Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

# FENTANYL AND/OR HEROIN

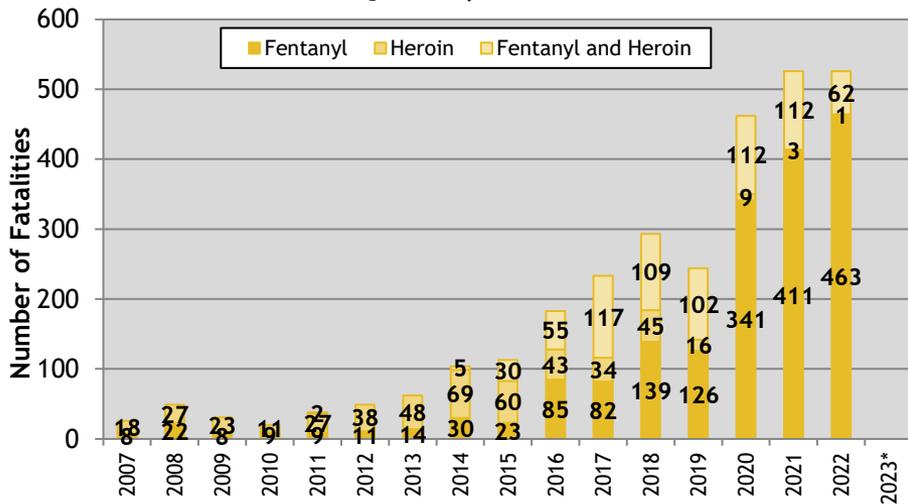
First Quarter, 2007-2023\*



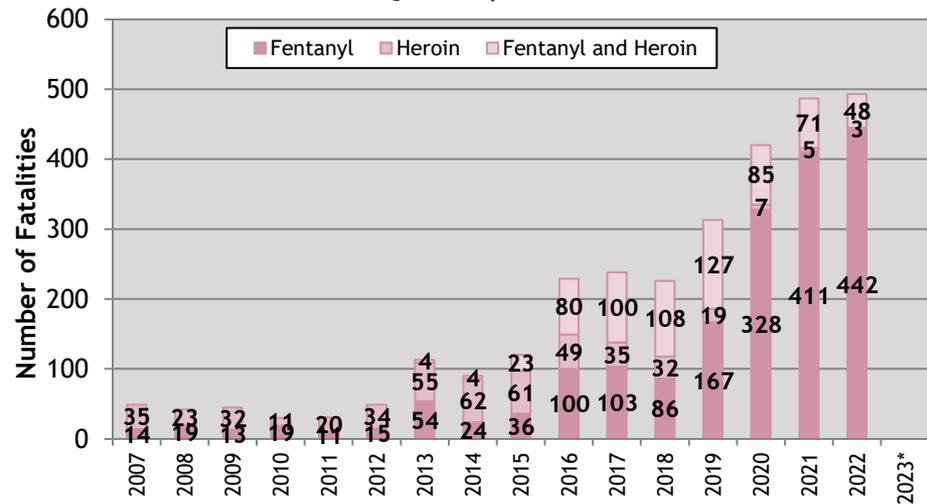
Second Quarter, 2007-2023\*



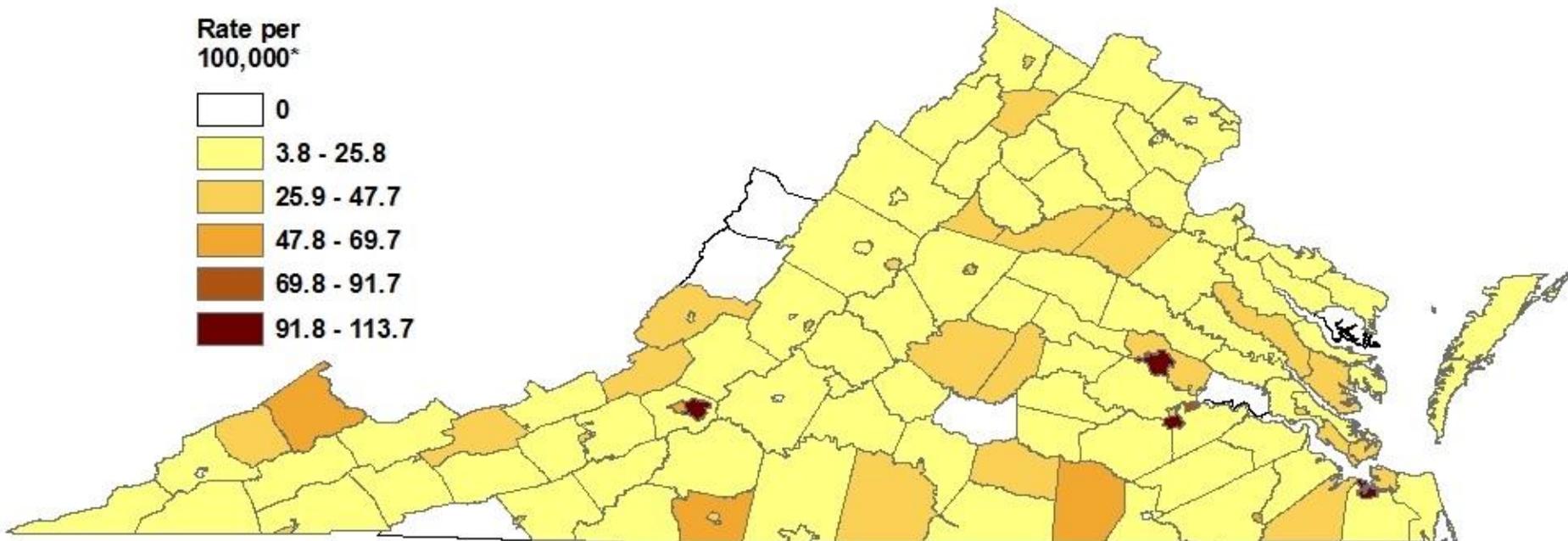
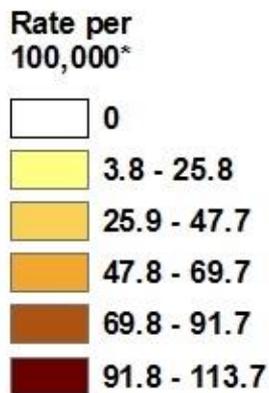
Third Quarter, 2007-2023\*



Fourth Quarter, 2007-2023\*



## Rate of All Fatal Fentanyl and/or Heroin Overdoses by Locality of Overdose, 2022

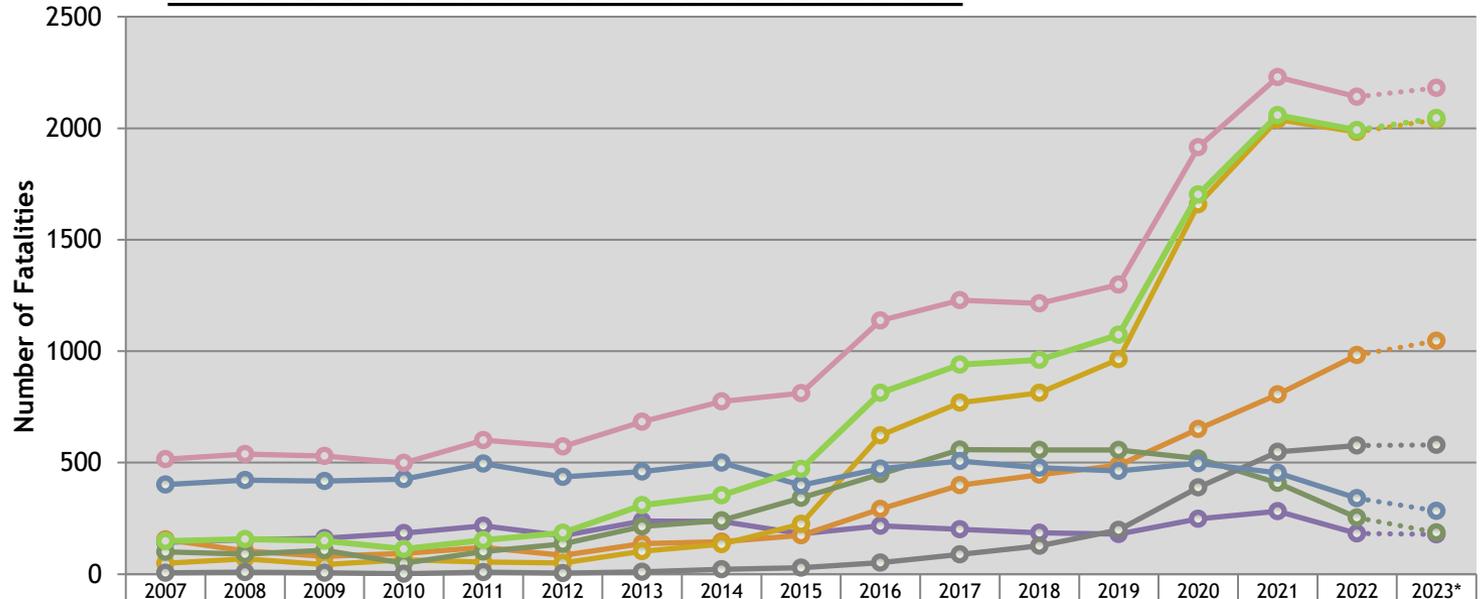


Source: Virginia Department of Health, Office of the Chief Medical Examiner

\* Rate groupings are based upon equal numerical range categories; rates based on small case counts (<5 deaths) are not suppressed

# ALL DRUGS

**Total Number of Fatal Drug Overdoses Drug Name/Category and Year of Death, 2007-2023\***  
**Data for 2023 is a Predicted Total for the Entire Year**



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023*
— Benzodiazepines	142	154	161	183	217	172	238	237	181	216	201	185	179	248	282	182	178
— Cocaine	155	104	80	93	120	84	137	145	174	292	399	446	488	650	806	983	1047
— Fentanyl	48	68	43	64	54	50	102	134	225	622	769	813	964	1659	2039	1983	2039
— Heroin	100	89	107	48	101	135	213	241	342	448	558	556	556	518	408	254	186
— Methamphetamine	6	9	5	1	8	4	10	21	29	51	88	127	198	388	548	576	579
— Prescription Opioids (excluding Fentanyl)	401	422	417	426	496	435	460	499	398	472	507	477	462	497	454	340	283
— All Opioids	516	538	530	498	601	572	684	775	812	1138	1229	1215	1298	1915	2229	2141	2181
— Heroin and/or Fentanyl	148	157	150	112	153	185	309	353	471	813	939	961	1073	1702	2058	1992	2046

<sup>1</sup> Deaths may be represented in more than one category due to groupings of drug categories (e.g. heroin)

<sup>2</sup> 'All Opioids' includes all versions of fentanyl, heroin, prescription opioids, U-47700, and opioids unspecified

<sup>3</sup> 'Opioids Unspecified' are a small category of deaths in which the determination of heroin and/or one or more prescription opioids cannot be made due to specific circumstances of the death. Most commonly, these circumstances are a result of death several days after an overdose, in which the OCME cannot test for toxicology because the substances have been metabolized out of the decedent's system.

<sup>4</sup> Historically, fentanyl has been categorized as a prescription opioid because it is mass produced by pharmaceutical companies. However, recent law enforcement investigations and toxicology results have demonstrated that several recent fentanyl seizures have **not** been pharmaceutically produced, but illicitly produced. This illicit form of fentanyl is produced by international drug traffickers who import the drug into the United States and often, mix it into heroin being sold. This illicitly produced fentanyl has been the biggest contributor to the significant increase in the number of fatal opioid overdoses in Virginia.

<sup>5</sup> Illicit and pharmaceutically produced fatal fentanyl overdoses are represented in this analysis. This includes all different types of fentanyl analogs (acetyl fentanyl, furanyl fentanyl, etc.)

# CONTACT INFORMATION

This report is compiled by the Virginia Department of Health, Office of the Chief Medical Examiner. For additional information regarding these or other statistics, please contact:

*Kathrin "Rosie" Hobron, MPH*  
*Statewide Forensic Epidemiologist*  
*Virginia Department of Health*  
*Office of the Chief Medical Examiner*  
*804-786-6063*  
[kathrin.hobron@vdh.virginia.gov](mailto:kathrin.hobron@vdh.virginia.gov)  
<http://www.vdh.state.va.us/medexam/>

This report and associated spreadsheets of various types of drug deaths by locality and year are available on the OCME website: <https://www.vdh.virginia.gov/medical-examiner/forensic-epidemiology/>