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# Fentanyl-Positive Deaths, North Carolina Office of the Chief Medical Examiner (OCME) Toxicology Data: Apr 2023\*

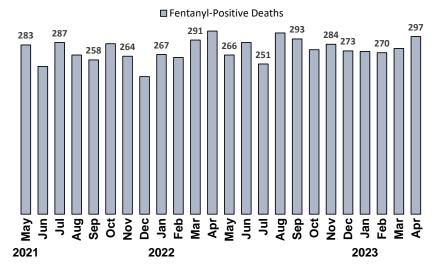
Fentanyl-Positive Deaths^, April 2023\*

**Compared to** 

306 in April 2022

^Deaths included in this report tested positive for fentanyl at the time of the death when toxicology testing was performed. Toxicology results are based on analytical testing of specimens performed by NC OCME Toxicology. The detection of fentanyl only indicates deaths with positive fentanyl toxicology results. The presence of fentanyl at time of death does not necessarily indicate fentanyl as the cause of death.

### Last 24 Months of Fentanyl-Positive Deaths\*



\*Data are provisional and subject to change.

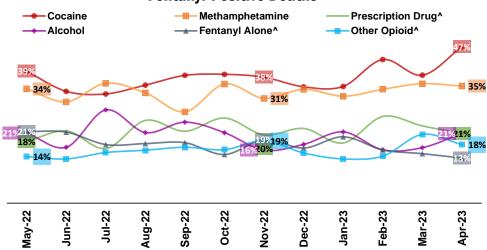
Data Source: NC OCME Toxicology data; NC OCME Toxicology is nationally accredited by the American Board of Forensic Toxicology, Inc. NC OCME Toxicology provides forensic analytical testing of specimens for all 100 counties of the statewide medical examiner system. Toxicology results are based on blood, vitreous fluid, or other specimens used for testing at the discretion of the pathologist and/or toxicologist.

### Fentanyl-Positive Deaths: 2016-2023\*



Percent change: Year-to-date (YTD) fentanyl-positive deaths compared to YTD total of previous year.

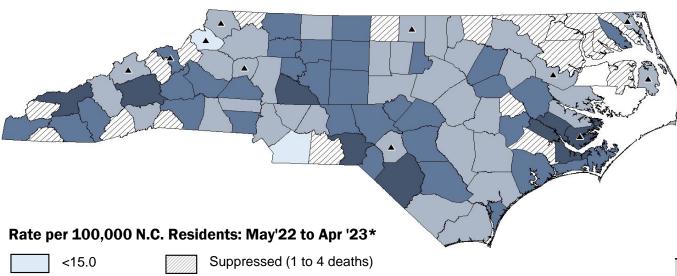
## Last 12 Months Polysubstance Use in Fentanyl-Positive Deaths\*^



^Categories are not mutually exclusive. Prescription drugs are defined as benzodiazepines and gabapentin/pregabalin. Other opioids include heroin, prescription opioids, and illicit opioids (excluding fentanyl). Fentanyl alone indicates that alcohol, cocaine, prescription drugs (benzodiazepines and gabapentin/pregabalin), methamphetamine, and other opioids were not present.



### Rate of Fentanyl-Positive Deaths in North Carolina by County: May '22 to Apr '23\*



No fentanyl-positive deaths

(5 to 9 deaths)

Interpret with caution, low numbers

Highest Rates of Fentanyl-Positive Deaths
Among Counties with >4 deaths: May'22 to
Apr '23\*

County	Deaths	Rate
Swain	12	84.6
Richmond	32	72.2
Robeson	91	70.0
Craven	70	69.1
Rowan	95	66.7
Pamlico	8	62.9
Buncombe	147	55.8
Randolph	76	52.6
Montgomery	14	51.4
Gaston	111	49.0
Statewide	3,348	31.6

\*2022 data are considered provisional and should not be considered final. Deaths included in this report tested positive for fentanyl at the time of the death when toxicology testing was performed. Toxicology results are based on analytical testing of specimens performed by NC OCME Toxicology. The detection of fentanyl only indicates deaths with positive fentanyl toxicology results. The presence of fentanyl at time of death does not necessarily indicate fentanyl as the cause of death.

### Demographics of Fentanyl-Positive Deaths Compared to Overall NC Population Estimates: Apr 2023 YTD\*

#### **Deaths by Sex Deaths by Age Group Deaths by Race/Ethnicity** ■ NC Population Estimates ■ NC Population Estimates ■ NC Population Estimates ■NC Fentanyl-Positive Deaths^, Apr 2023 YTD\* ■NC Fentanyl-Positive Deaths^, Apr 2023 YTD\* ■ NC Fentanyl-Positive Deaths^, Apr 2023 YTD\* 0% 20% 60% 80% 20% 40% 80% 20% 40% 60% 0% 80% White NH 15-24 Female 25-34 Black NH 35-44 Hispanic 45-54 Asian NH Male 55-64 AI/AN NH 65+ Note: NH (Non-Hispanic); ^Data Sources: Toxicology Data—NC OCME Toxicology; Demographic Data—OCME medical examiner system; AI/AN (American Population Data—U.S. Census Bureau, http://quickfacts.census.gov; 2022-2023 data are considered provisional Indian/Alaskan Native) HEALTH AND HUMAN SERVICES

and should not be considered final. Year-to-date (YTD).

15.1 - 30.5

30.6 - 52.6

≥ 52.7