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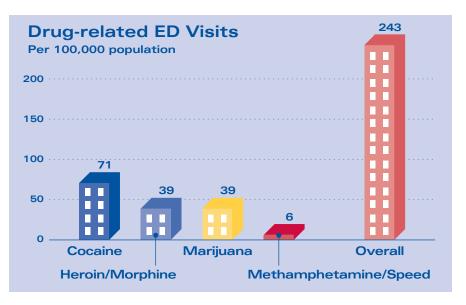
Major Drugs of Abuse in ED Visits, 2000

In Brief

In this issue of *The DAWN Report*, we report on the distribution of four major drugs of abuse – heroin, cocaine, marijuana, and methamphetamine – associated with visits to hospital emergency departments in 21 major metropolitan areas and the continental U.S.

In 2000, there were an estimated 243 drug abuse-related ED visits per 100,000 population in the coterminous U.S. These drug-related ED visits included an estimated 71 cocaine mentions per 100,000 population, 39 heroin mentions, 39 marijuana mentions, and 6 methamphetamine mentions per 100,000 population (see box). Together, these four drugs accounted for 35% of all drug mentions in DAWN-reportable ED visits in 2000. (A drug "mention" is an instance of a particular drug being recorded – "mentioned" – in an ED visit reported to DAWN. As many as 5 drugs can be recorded for a single visit.) The reference population is persons age 6 to 97 who were treated in a hospital emergency department for a drug abuse-related condition.

The inside page includes a map that displays ED visits for the same four drugs for each of 21 major metropolitan areas. To control for differences in population size across the metropolitan areas, drug-related ED visits are expressed as a rate per



100,000 population for each metropolitan area. Therefore, the map may be used to compare individual metro areas to the U.S. as a whole as well as to other metro areas. The estimates shown on the map reflect ED visits and population for the entire metropolitan area, not just the city for which it is named.

For example, the map shows that most of the 21 major metropolitan areas exceeded the national average for cocaine mentions, but there was substantial variation across metro areas in the volume of cocainerelated visits. Chicago had 208 cocaine mentions per 100,000 population, compared with Minneapolis, which had only 35 cocaine mentions per 100,000 population. Likewise, the map shows the higher concentration of methamphetamine-related ED visits in the western cities, with very few mentions of methamphetamine in

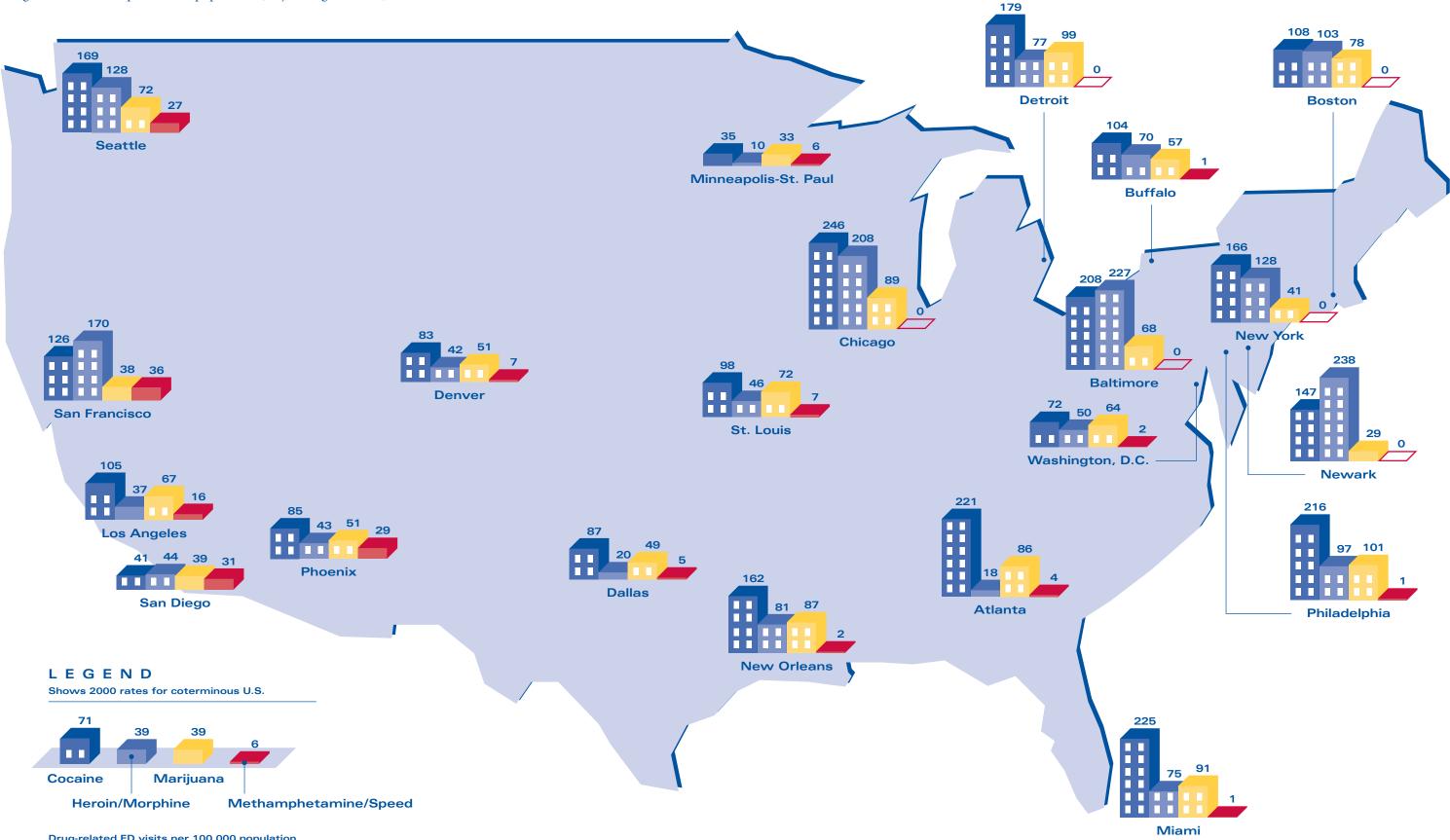
the mid-Atlantic and New England cities.

The back cover of this report provides a series of bar charts showing these same populationbased rates of ED visits for cocaine, heroin, marijuana and methamphetamine, with metro areas shown in descending order of rates. These charts permit easier side-by-side comparison of metro areas on these major drugs of abuse.

This report focuses only on four major drugs of abuse. However, thousands of drugs are reported to DAWN each year. A more extensive list of drug mentions for the Nation, and an abbreviated list for each metro area, are published in other DAWN publications – DAWN Trends and Detailed ED Tables – available online at www.DrugAbuseStatistics. SAMHSA.gov.

What Is Your City Reporting to DAWN?

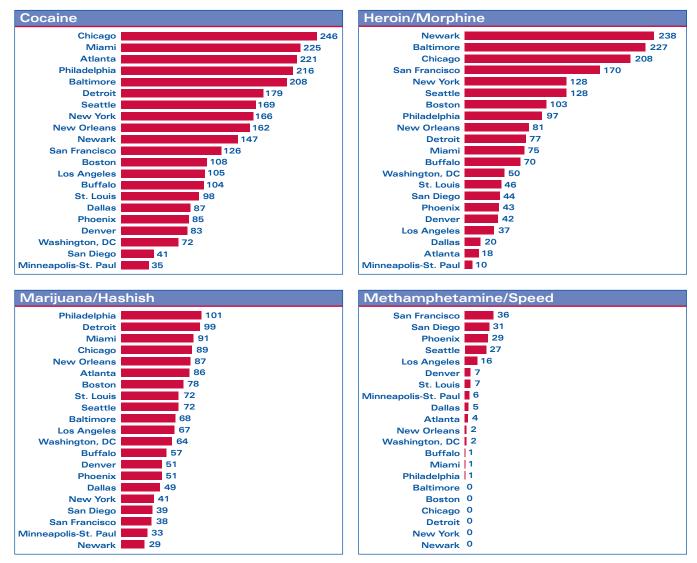
Drug-related ED visits per 100,000 population (major drugs of abuse), 2000



Drug-related ED visits per 100,000 population

Rankings by Metropolitan Area

The following charts rank the metropolitan areas based on the rate of ED visits for the four major drugs per 100,000 population.



About DAWN

The Drug Abuse Warning Network (DAWN) is a national surveillance system that collects data on drugrelated emergency department visits and drug-related deaths reviewed by medical examiners and coroners. (A similar summary of data on drug-related deaths is planned for a future issue of *The DAWN Report*.) Data on ED visits are collected from a national probability sample of non-Federal, short stay hospital EDs. The sample provides estimates for the coterminous U.S., as well as for 21 selected metropolitan areas.

Cases are reportable to DAWN if the ED visit involved a person between the ages of 6 to 97 who showed evidence of intentional abuse or misuse of a drug — that is, the case must have involved drug abuse, drug dependence, recreational use, or suicide attempt. Abuse of prescription and over-the-counter medications is reportable. However, adverse reactions associated with proper use of these drugs, and the results of accidental ingestion or inhalation of any drug, are not reportable. Chronic health conditions resulting from habitual drug use are reportable. By focusing on drugs of abuse, DAWN provides an indicator of current and emerging drug abuse trends throughout the country.

The Dawn Report is published periodically by the Office of Applied Studies, Substance Abuse and Mental Health Services Administration (SAMHSA). This issue was written by Dr. Lori Ducharme (Westat) and Dr. Judy Ball (SAMHSA/OAS Project Officer). 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.