

# The DAWN Report

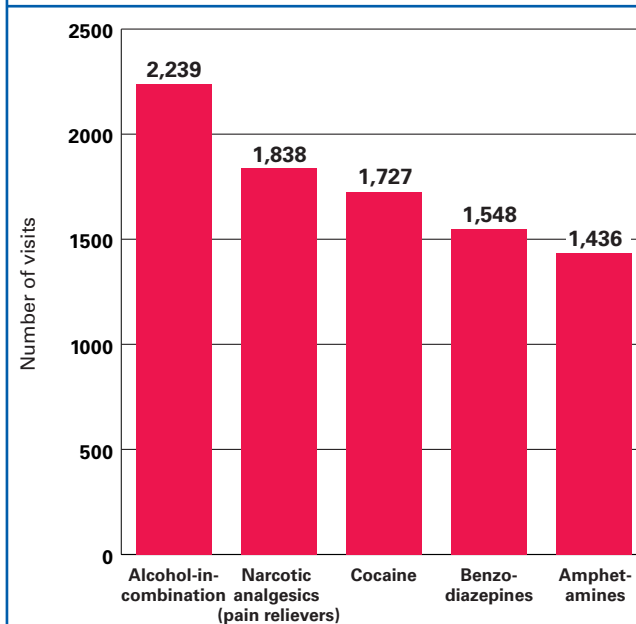
APRIL 2004

## Highlights From DAWN: Phoenix, 2002

This special report presents findings based on data submitted by 14 hospitals in the Phoenix metropolitan area for 2002.

- Of the 880,000 visits to Phoenix area emergency departments (EDs) in 2002, slightly more than 1 percent (10,292) were related to drug abuse.
- During 2002, the most common drugs involved in these ED visits were alcohol in combination with other drugs, narcotic analgesics (pain relievers), cocaine, benzodiazepines, amphetamines, and marijuana.
- Between 1995 and 2002, ED mentions of pain relievers in Phoenix increased 156 percent (from 24 to 62 mentions per 100,000 population).
- Among the DAWN areas, Phoenix ranked in the top 5 in terms of ED visits involving amphetamines and methamphetamine in 2002.

Top 5 drugs in drug abuse-related ED visits in Phoenix, 2002



## DAWN: The Warning Network

Local information is essential to support local action, and drugs, drug use, and drug-related morbidity can differ dramatically across communities. DAWN focuses on metropolitan areas to reveal emerging drug problems before they become widespread.

DAWN detects new drugs, new drug combinations, new health consequences of drug use, and changing patterns involving old drugs. Facilities participating in DAWN can use this information to train staff and improve patient care. Communities can use this information to plan, target resources, and act more effectively.

Today, hospitals in Phoenix and 20 other metropolitan areas serve their communities by participating in DAWN. Expansion to other areas is underway.

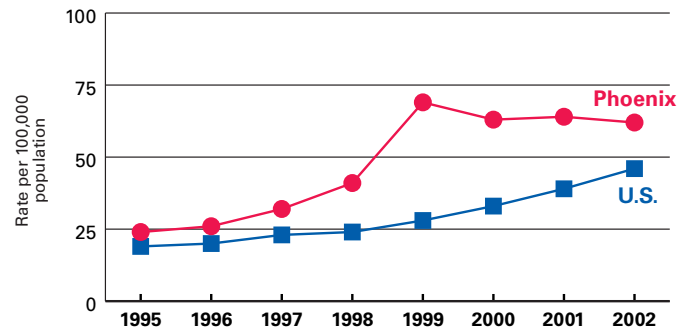


**DAWN** serves a diverse audience. In addition to participating facilities, users include researchers and policy analysts; pharmaceutical firms; State and local substance abuse agencies; community coalitions; and Federal agencies, including the White House Office of National Drug Control Policy, the Food and Drug Administration, and the National Institute on Drug Abuse. For more information, go to <http://DAWNinfo.samhsa.gov/>.

## Trends in Top 4 Drugs, 1995-2002

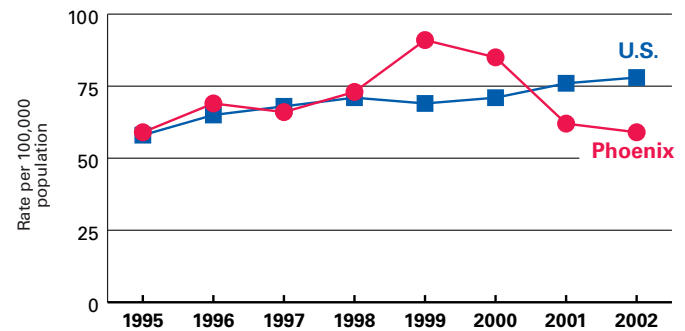
### Pain Relievers

- From 1995 to 2002, pain relievers implicated in drug abuse-related ED visits in Phoenix rose 156 percent (from 24 to 62 ED mentions per 100,000 population). The national rate increased similarly in percentage terms over the 8-year period (from 19 to 46 mentions per 100,000 population).
- Oxycodone, hydrocodone, and methadone were the most frequently named pain relievers in drug abuse-related ED visits in Phoenix in 2002.



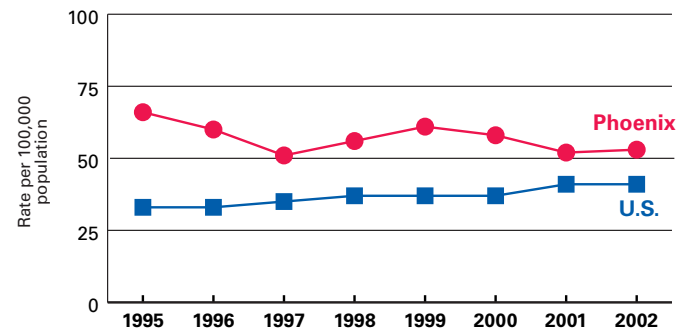
### Cocaine

- From 1995 to 1999, the rate of cocaine-related ED visits in Phoenix rose (from 59 to 91 visits per 100,000), but by 2002 had returned to 1995 levels.
- Almost two-thirds (62%) of cocaine-related ED visits in Phoenix also involved other drugs.
- About one-sixth (16%) of the cocaine-related ED visits in Phoenix in 2002 were attributed to "crack."



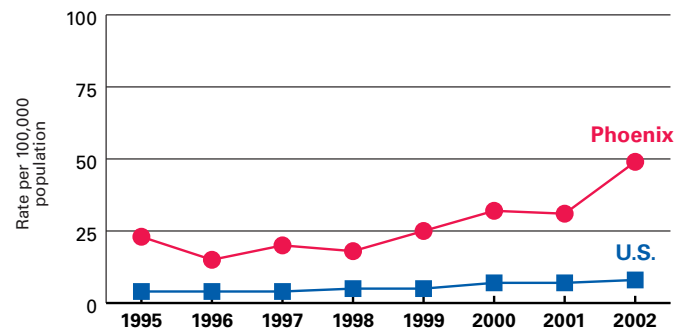
### Benzodiazepines

- From 1995 to 2002, benzodiazepines implicated in drug abuse-related ED visits in Phoenix remained relatively stable. Nationally, the rate increased 25 percent during this time (from 33 to 41 visits).
- Clonazepam, alprazolam, lorazepam, and diazepam were the most frequently named benzodiazepines in drug abuse-related ED visits in Phoenix in 2002.



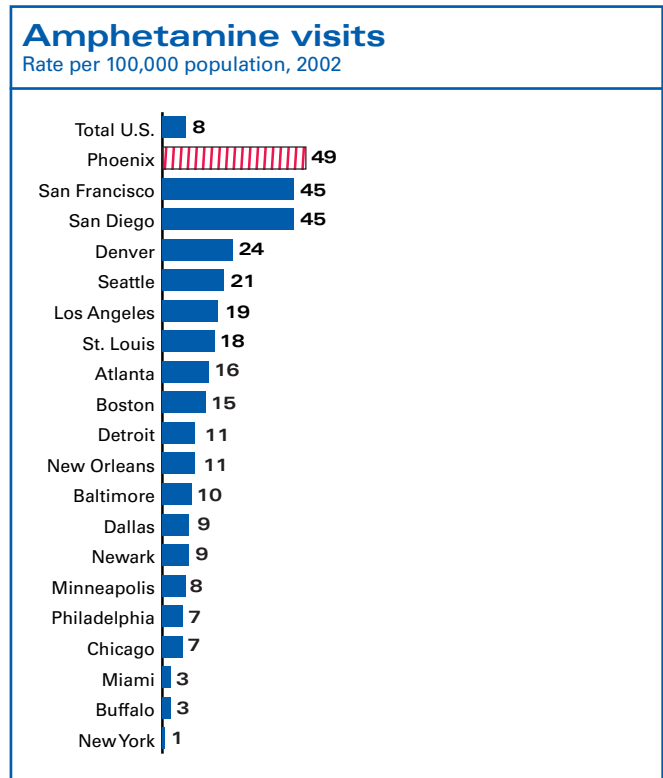
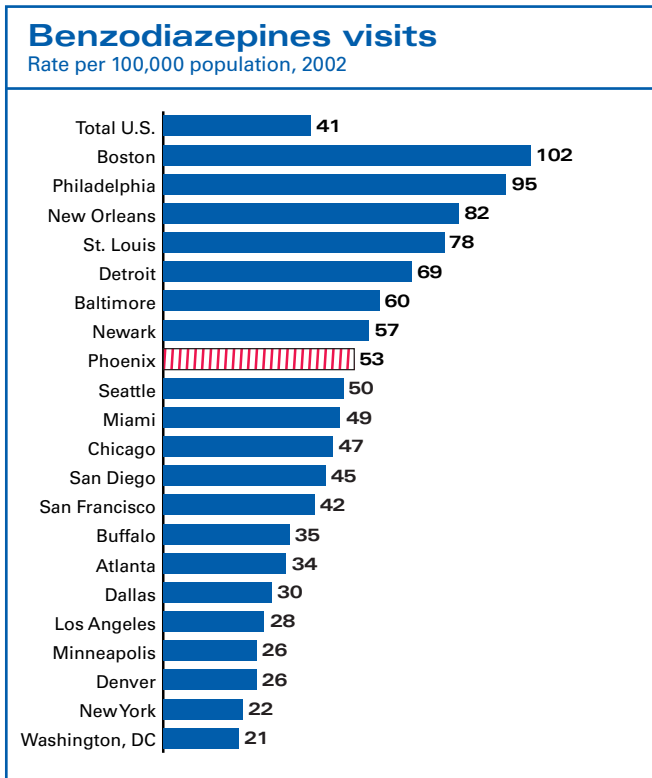
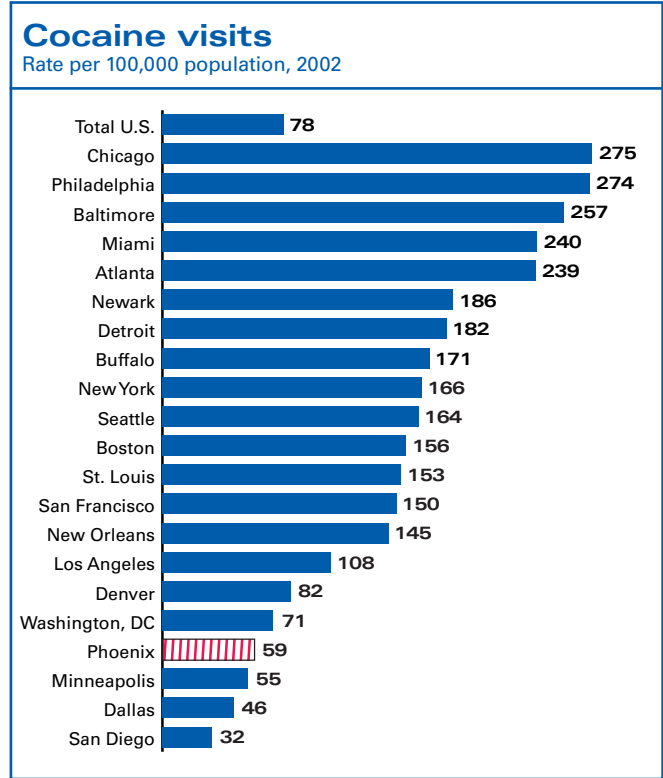
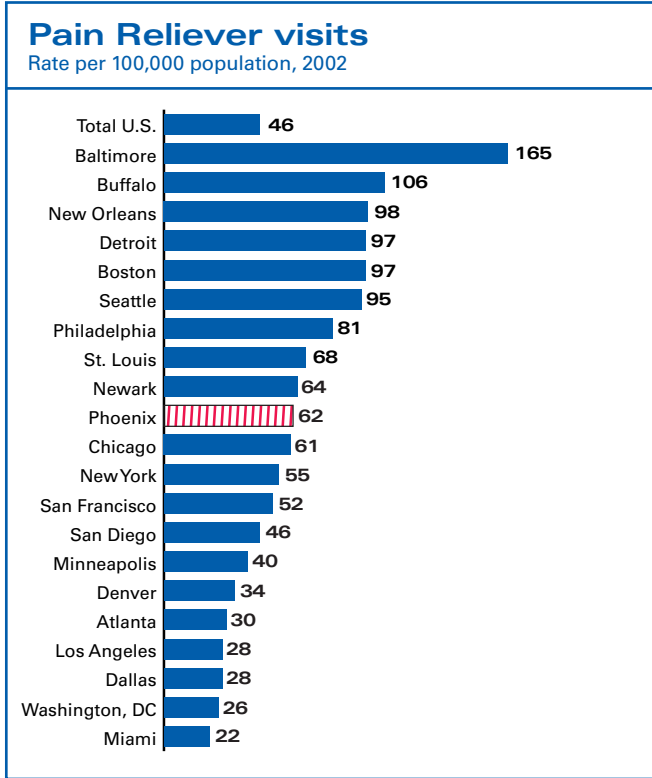
### Amphetamines

- The rate of amphetamine-related ED visits in Phoenix increased by 56 percent between 2001 and 2002 alone (from 31 to 49 visits per 100,000 population).
- In 2002, the rate of amphetamine-related ED visits in Phoenix stood at more than 6 times the national rate (8 visits per 100,000).
- In Phoenix, ED visits involving amphetamines usually involved other drugs as well (57%).



## Comparisons Across 21 Metropolitan Areas

The following figures show Phoenix in relation to the Nation and 20 other metropolitan areas represented in DAWN for selected drugs in 2002. Comparisons across areas are possible because the number of visits for each drug is represented in terms of a rate per 100,000 population. Not all differences in rates are statistically significant.



## About DAWN

The **Drug Abuse Warning Network (DAWN)** is a national surveillance system that monitors drug-related morbidity and mortality. Section 505 of the Public Health Service Act assigns this responsibility to the Substance Abuse and Mental Health Services Administration (SAMHSA), an agency of the U.S. Department of Health and Human Services. The Act requires SAMHSA to report annually on drug-related visits to hospital emergency departments and on drug-related deaths reviewed by medical examiners and coroners. SAMHSA has a contract with Westat, a private research firm based in Rockville, MD, to operate the DAWN system.

DAWN collects data from a scientific sample of hospital emergency departments and a set of medical examiners and coroners from across the U.S., with concentrations in selected metropolitan areas. Each participating facility has a DAWN Reporter who is specially trained to identify DAWN cases by retrospectively reviewing emergency department medical records or death investigation case files. No patient, family member, or physician is ever interviewed. No direct identifiers for individual patients or decedents are collected.

Beginning in 2003, DAWN cases include any emergency department visit or death that was related to drug use. Reportable cases include drug abuse, misuse, overmedication, accidental and malicious poisonings, and adverse drug reactions. For each case, the DAWN Reporter submits a case report detailing the specific drugs involved, and characteristics of the patient or decedent and event (visit or death). Patient and decedent characteristics include demographics (age, gender, race/ethnicity) and ZIP code. Other data items include date/time, chief complaint, diagnoses, and disposition for each emergency department visit; and date, cause, manner, and place of death for each decedent.



**U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES**