

Substance Use and Mental Health During COVID-19

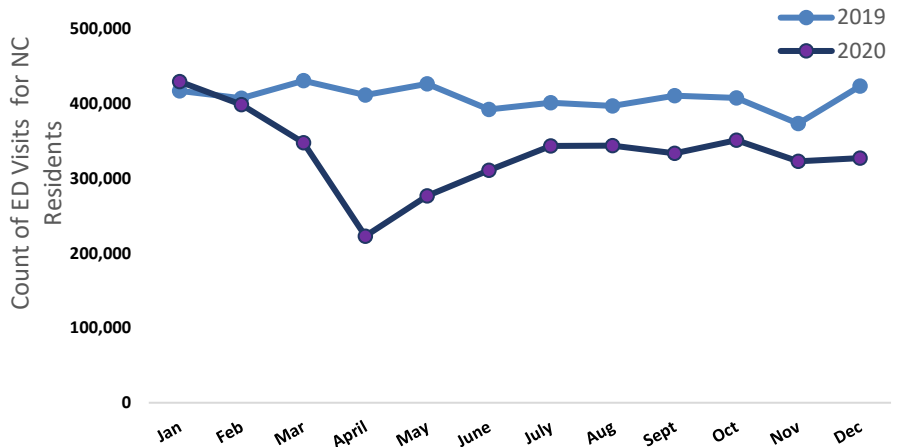
Restrictions implemented to slow the spread of COVID-19 in Spring 2020 altered health behaviors and healthcare utilization nationwide. Alcohol consumption* and substance use increased; more US adults reported anxiety or depression symptoms and seriously considering suicide than before restrictions went into effect**. Emergency department (ED) visit data provided timely insight into these trends in North Carolina (NC). ED utilization decreased dramatically during the early months of the pandemic, but the proportion of these visits for substance use and mental health codes increased from 2019. New or worsened substance use and mental health disorders during the COVID-19 pandemic have both immediate and long-term consequences.

*Pollard MS, Tucker JS, Green HD. Changes in Adult Alcohol Use and Consequences During the COVID-19 Pandemic in the US. JAMA Netw Open. 2020;3(9):e2022942. **Czeisler ME, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057.

Emergency Department Visits, NC Residents, 2019-2020

Overall ED visits in NC sharply declined under the restrictions implemented to slow the spread of COVID-19 in spring 2020. While visits increased later in the year, they did not resume to 2019 levels. April 2020 ED utilization was only 54% of 2019 levels; in November, 2020 levels were 86% of 2019 levels.

Looking at alcohol, med/drug, and mental health visits as a percent of total visits can help shed light on trends within the context of the overall decrease in total visits.



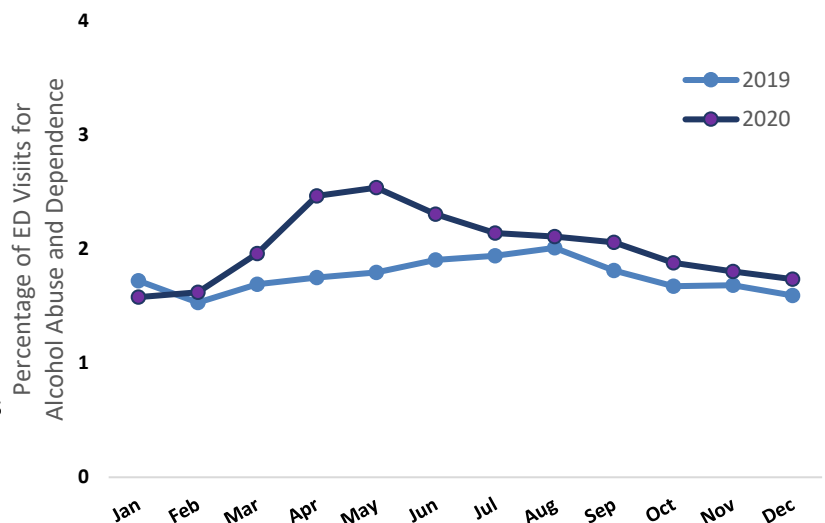
Source: NC DETECT (statewide ED data), NC Division of Public Health & Carolina Center for Health Informatics, UNC Department of Emergency Medicine (UNC DEM), 2019-2020

Alcohol Misuse and Dependence ED Visits, NC Residents, 2019-2020

The number of ED visits for alcohol misuse and dependence was similar in 2020 to years prior, but the proportion of alcohol-related ED visits **increased 13%**, from 1.8% of 2019 visits to 2.0% of 2020 visits. The count decreased from 86,043 in 2019 to 79,261 visits in 2020.

These visits are for alcohol withdrawal, alcohol dependence, and other complications caused by alcohol dependence.

Excessive alcohol consumption also contributes to acute and chronic health outcomes, including injuries, cirrhosis, and certain cancers. These outcomes are not captured by this definition, so NC DHHS will continue to monitor for these impacts.

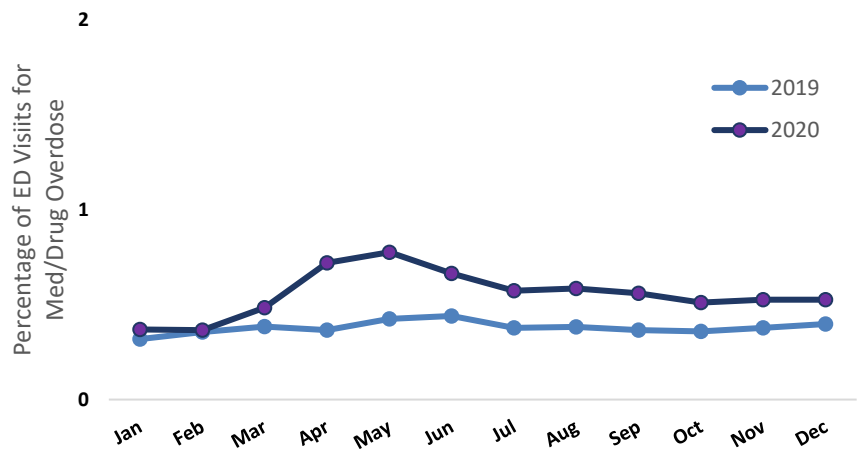


Source: NC DETECT (statewide ED data), NC Division of Public Health & Carolina Center for Health Informatics, UNC Department of Emergency Medicine (UNC DEM), 2019-2020. Syndrome definition: <https://ncdetect.org/case-definitions/>.

Medication/Drug Overdose ED Visits, NC Residents, 2019-2020

The number of and proportion of ED visits for medication and drug overdoses increased in 2020 compared with 2019. The proportion of visits **increased 43%**. The count of visits **increased 22%** from 12,163 visits in 2019 to 14,826 visits in 2020.

These visits are for unintentional and undetermined overdoses involving drugs and medications with dependency potential, including heroin, prescribed opioids, cocaine, and benzodiazepines.

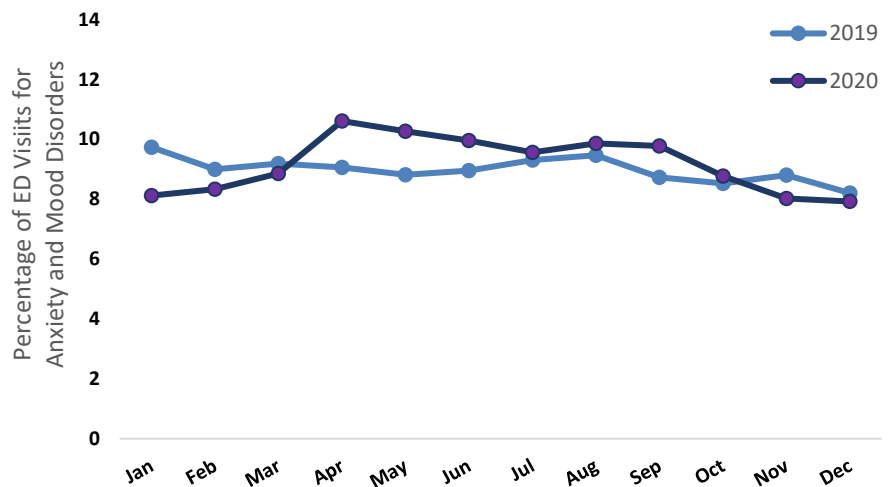


Source: NC DETECT (statewide ED data), NC Division of Public Health & Carolina Center for Health Informatics, UNC Department of Emergency Medicine (UNC DEM), 2019-2020. Syndrome definition: <https://ncdetect.org/case-definitions/>.

Mental Health ED Visits, NC Residents, 2019-2020

The number of ED visits for mental health in 2020 decreased from 2019. The proportion of mental health emergency department visits increased 1% compared with the same time period in 2019, from 9.0% of visits in 2019 to 9.1% of visits in 2020. The count of visits dropped from 440,029 visits in 2019 to 363,882 visits in 2020.

These visits include a variety of mental health conditions, including major depressive disorder, anxiety disorder, bipolar disorder, and panic disorder.



Source: NC DETECT (statewide ED data), NC Division of Public Health & Carolina Center for Health Informatics, UNC Department of Emergency Medicine (UNC DEM), 2019-2020. Syndrome definition: <https://ncdetect.org/case-definitions/>.

Additional Resources

[North Carolina Alcohol Data Dashboard](#)

Explore data on alcohol related harms in North Carolina and download fact sheets; data are available statewide and by county.

[North Carolina Opioid Action Plan Dashboard 2.0](#)

Track and monitor the N.C. Opioid Action Plan data metrics developed with community partners to combat the opioid epidemic; includes data for the state as well as local counties.

[CDC: Alcohol and Substance Use](#)

FAQ and resource links for alcohol and substance use services during COVID-19.

[WHO: Alcohol and COVID-19 - What you need to know](#)

FAQ on the individual impacts of alcohol.

[CDC: COVID-19 and People Who Use Drugs](#)

Q&A for people who use drugs or have a substance use disorder and medical professionals.

Injury Epidemiology & Surveillance Unit / 919-707-5425 / www.injuryfreenc.ncdhhs.gov

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