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# Fentanyl-Positive Deaths, North Carolina Office of the Chief Medical Examiner (OCME) Toxicology Data: Sep 2022\*

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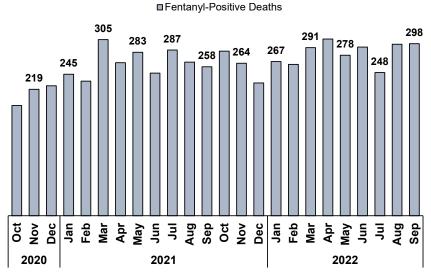
## Fentanyl-Positive Deaths<sup>^</sup>, September 2022\*

**Compared to** 

258 in September 2021

^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.

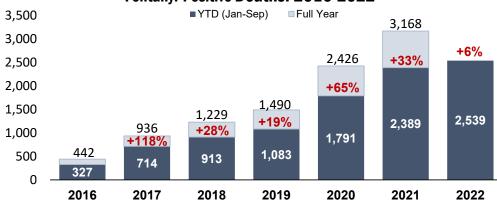
## **Last 24 Months of Fentanyl-Positive Deaths\***



\*Data are provisional and subject to change.

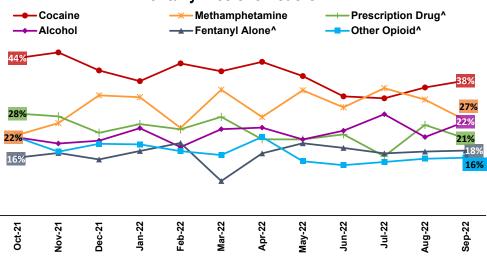
Data Source: NC OCME Toxicology data; NC OCME Toxicology is nationally accredited by the American Board of Forensic Toxicology, Inc. NC OCME Toxicology provides forensic analytical testing of specimens for all 100 counties of the statewide medical examiner system. Toxicology results are based on blood,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

## Fentanyl-Positive Deaths: 2016-2022\*



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

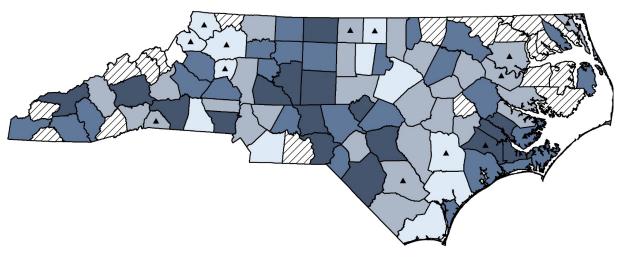
## Last 12 Months Polysubstance Use in Fentanyl-Positive Deaths\*^



^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.



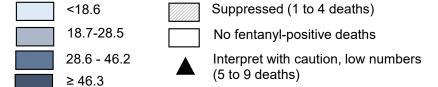
## Rate of Fentanyl-Positive Deaths in North Carolina by County: Oct'21 to Sep '22\*



**Highest Rates of Fentanyl-Positive Deaths Among Counties with >4** deaths: Oct'21 to Sep '22\*

County	Deaths	Rate
Jones	8	86.5
Richmond	33	74.4
Swain	10	70.5
Robeson	88	67.7
Craven	65	64.2
Randolph	91	63.0
Montgomery	16	58.7
Rowan	83	58.2
Rockingham	53	58.1
Buncombe	138	52.4
Statewide	3,318	31.3

#### Rate per 100,000 N.C. Residents: Oct'21 to Sep '22\*



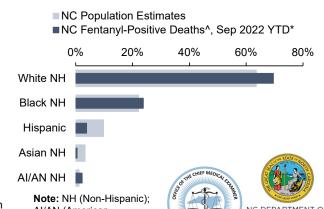
\*2022 data are considered provisional and should not be considered final. Deaths included in this report tested positive for fentanyl at the time of the death when toxicology testing was performed. Toxicology results are based on analytical testing of specimens performed by NC OCME Toxicology. The detection 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: September 2022 YTD^\*

#### **Deaths by Sex Deaths by Age Group** ■ NC Population Estimates ■ NC Population Estimates ■NC Fentanyl-Positive Deaths^, Sep 2022 YTD\* ■NC Fentanyl-Positive Deaths<sup>^</sup>, Sep 2022 YTD\* 0% 40% 60% 80% 20% 40% 60% 80% 20% 15-24 White NH Female 25-34 Black NH 35-44 Hispanic 45-54 Asian NH Male 55-64 AI/AN NH

^Data Sources: Toxicology Data—NC OCME Toxicology; Demographic Data—OCME medical examiner system; Population Data—U.S. Census Bureau, http://quickfacts.census.gov; 2022 data are considered provisional and should not be considered final. Year-to-date (YTD).

## **Deaths by Race/Ethnicity**



AI/AN (American Indian/Alaskan Native)



