

The DAWN Report

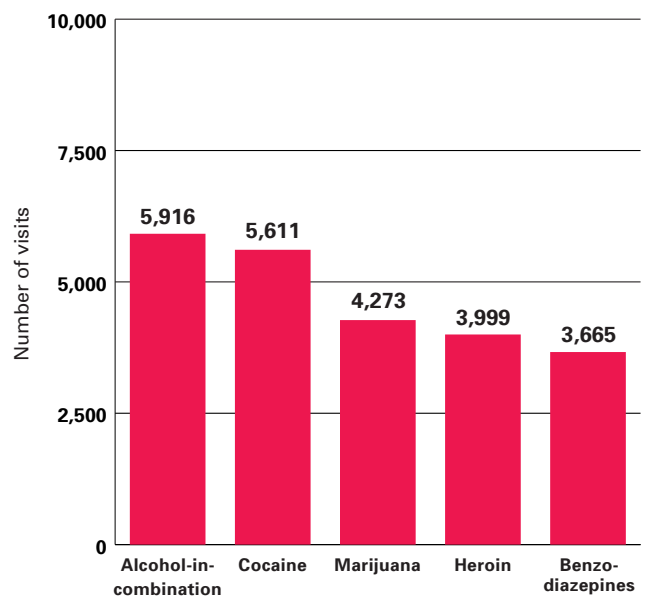
DECEMBER 2003

Highlights From DAWN: Boston, 2002

This special report presents findings based on data submitted by 22 hospitals in the Boston metropolitan area for 2002.

- Of the approximately 1.6 million visits to Boston area emergency departments (EDs) in 2002, about one percent (17,965) were related to drug abuse.
- During 2002, the most common drugs involved in these ED visits were alcohol, cocaine, marijuana, heroin, and benzodiazepines.
- From 1995 to 2002, the rate of drug abuse-related ED visits remained relatively stable in Boston.
- Among the 21 DAWN areas, Boston has ranked consistently in the top two for ED visits involving benzodiazepines and drug abuse in every year since 1995.

Top 5 drugs in drug abuse-related ED visits in Boston, 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.



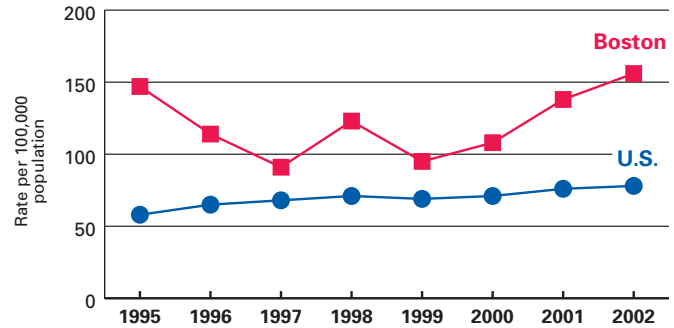
Today, hospitals in Boston and 20 other metropolitan areas serve their communities by participating in DAWN. Expansion to other areas is underway.

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

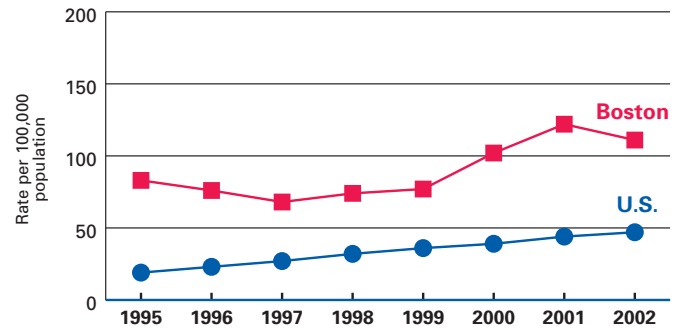
Cocaine

- Cocaine-related ED visits in Boston remained stable from 1995 to 2002. While the national rate was 78 cocaine-related visits per 100,000 population in 2002, Boston's rate was 156 visits, twice the national rate.
- More than three-quarters (76%) of cocaine-related visits in Boston involved other drugs, most frequently alcohol or marijuana.



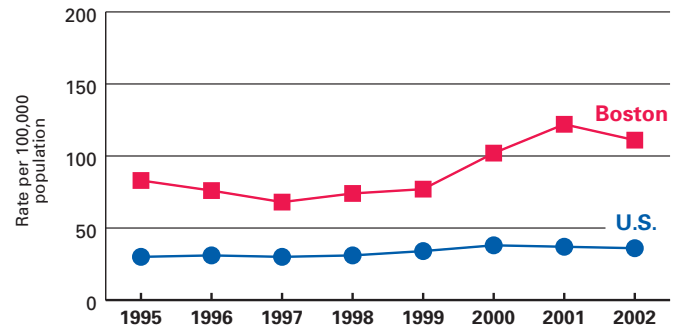
Marijuana

- In 2002, Boston had one of the highest rates of marijuana-related ED visits among the 21 DAWN metropolitan areas. However, while the national rate of marijuana-related ED visits increased 139 percent from 1995 to 2002, the rate in Boston was relatively stable.
- ED visits involving marijuana usually involve other drugs as well (67%).



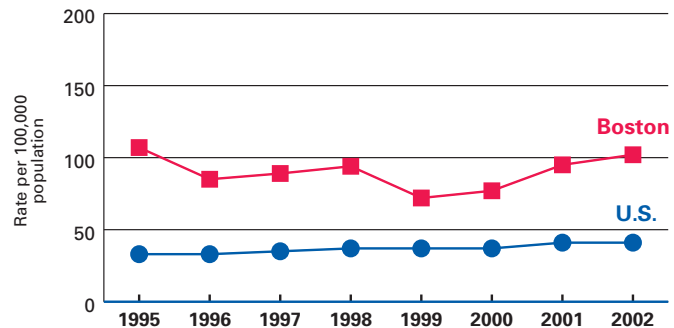
Heroin

- Boston did not experience the increase in heroin-related ED visits that occurred nationally between 1995 and 2002. Nonetheless, Boston's rate of heroin-related visits (111 visits per 100,000 population) was three times the national rate (36) in 2002.
- In more than half (52%) of heroin-related ED visits, heroin was the only drug reported.



Benzodiazepines

- Nationally, the rate of benzodiazepine-related ED visits rose 25 percent from 1995 to 2002. By contrast, the rate in Boston, while not increasing, has been consistently double or triple the national rate over the entire 8-year period.
- During 2002, clonazepam, alprazolam, and lorazepam were the most frequently named benzodiazepines in drug abuse-related ED visits in Boston.

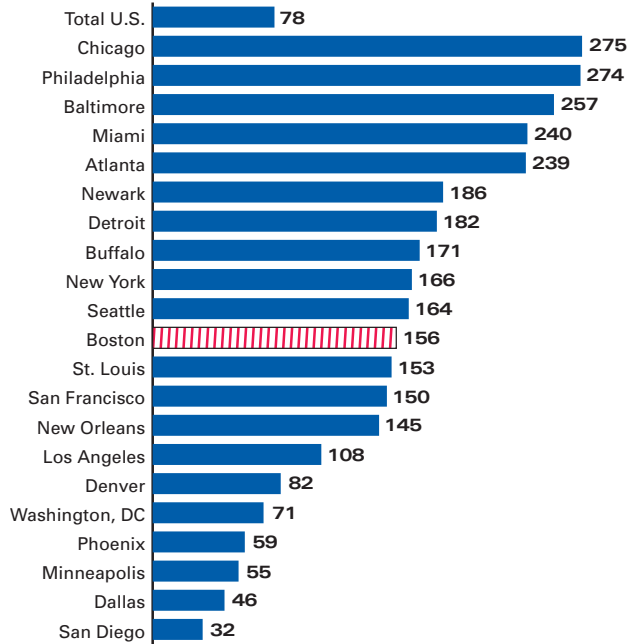


Comparisons Across 21 Metropolitan Areas

The following figures show Boston 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.

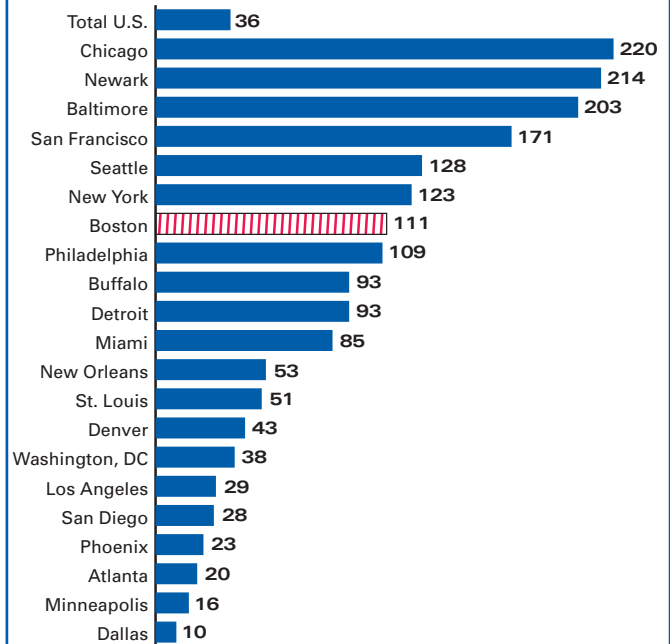
Cocaine visits

Rate per 100,000 population, 2002



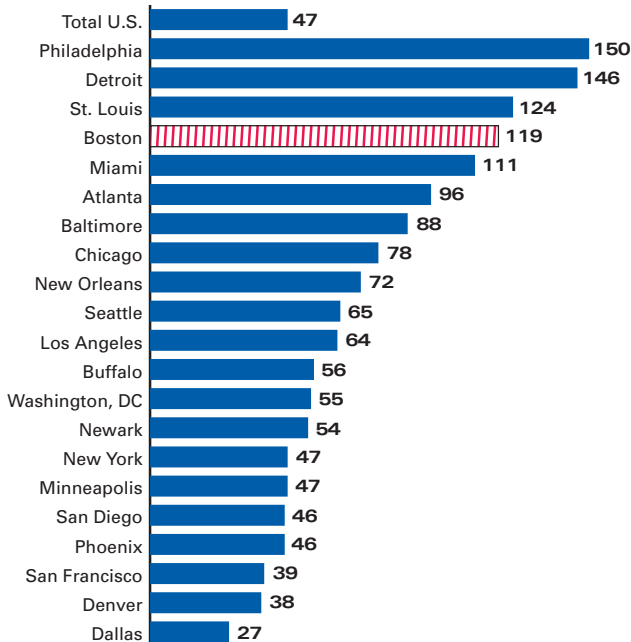
Heroin visits

Rate per 100,000 population, 2002



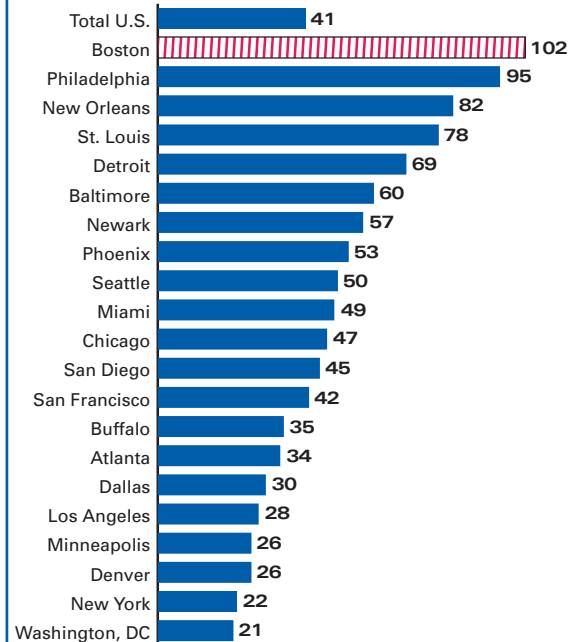
Marijuana visits

Rate per 100,000 population, 2002



Benzodiazepines visits

Rate per 100,000 population, 2002



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.



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