

# The DAWN Report

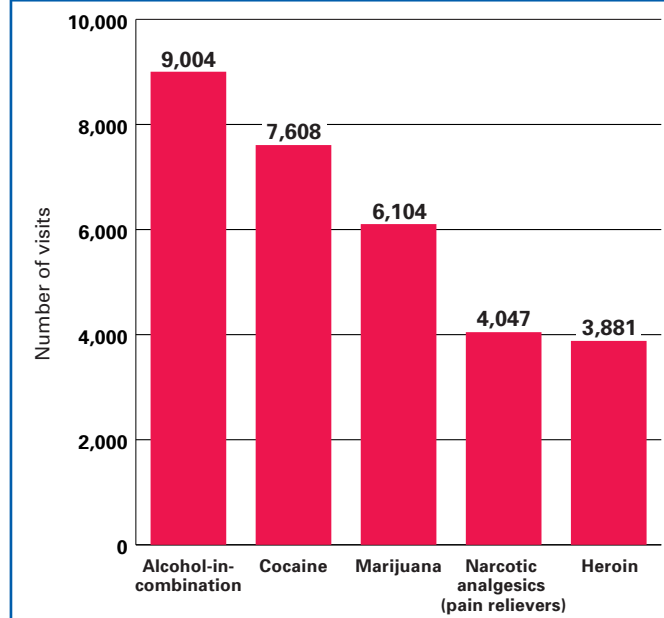
MARCH 2004

## Highlights From DAWN: Detroit, 2002

This special report presents findings based on data submitted by 16 hospitals in the Detroit metropolitan area for 2002.

- Of the 1.7 million visits to Detroit area emergency departments (EDs) in 2002, about one percent (20,979) were related to drug abuse.
- During 2002, the most common drugs involved in these ED visits were alcohol in combination with other drugs, cocaine, marijuana, narcotic analgesics (pain relievers), and heroin.
- Between 2000 and 2002, the rate of ED mentions of pain relievers in Detroit increased 72 percent (from 56 to 97 mentions per 100,000 population).
- Among the 21 DAWN areas, Detroit ranked in the top 5 in terms of ED visits involving pain relievers, marijuana, and alcohol.

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



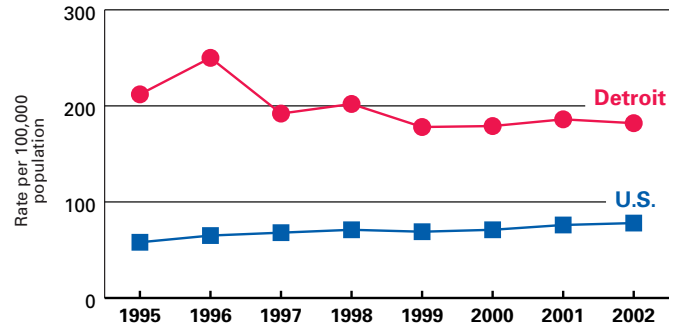
Today, hospitals in Detroit and 20 other metropolitan areas serve their communities by participating in DAWN. Expansion to other areas is underway.

**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

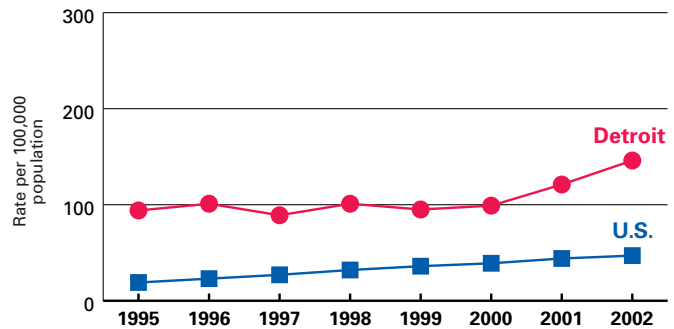
### Cocaine

- Detroit had 182 cocaine-related ED visits per 100,000 population in 2002, a number similar to that in 1995. By contrast, the rate for the U.S. was 78 per 100,000 in 2002.
- Over three-quarters (78%) of cocaine-related ED visits in Detroit also involved other drugs.
- More than one-third (37%) of cocaine-related ED visits were attributed to "crack."



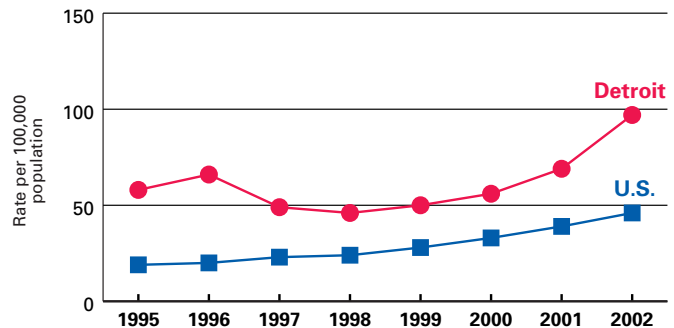
### Marijuana

- From 2000 to 2002, marijuana-related ED visits in Detroit rose 48 percent (from 99 to 146 visits per 100,000 population). The national rate (47 visits per 100,000) increased only 19 percent over the same 2-year period.
- Marijuana was reported in about 30 percent of all drug abuse-related ED visits in Detroit, usually in combination with other drugs.



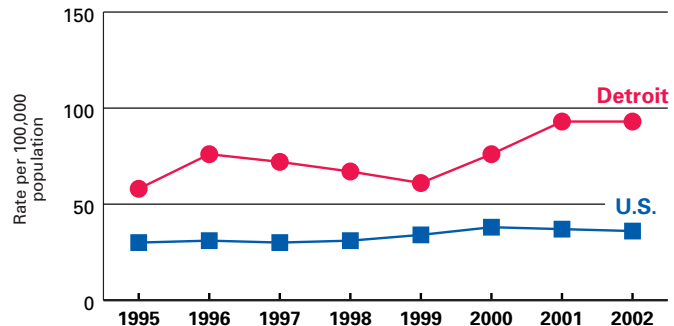
### Pain Relievers

- From 2000 to 2002, pain relievers implicated in drug abuse-related ED visits increased 72 percent in Detroit (from 56 to 97 mentions per 100,000 population). The increase nationally was 39 percent.
- Hydrocodone and codeine were the most frequently named pain relievers in drug-related ED visits in Detroit in 2002.



### Heroin

- At 93 visits per 100,000 population in 2002, Detroit's rate of heroin-related ED visits was more than double the national rate of 36. Heroin-related ED visits in Detroit stabilized from 2001 to 2002, following a substantial increase from 1999 to 2001.
- Nearly 60 percent of heroin-related ED visits in Detroit also involved other drugs.

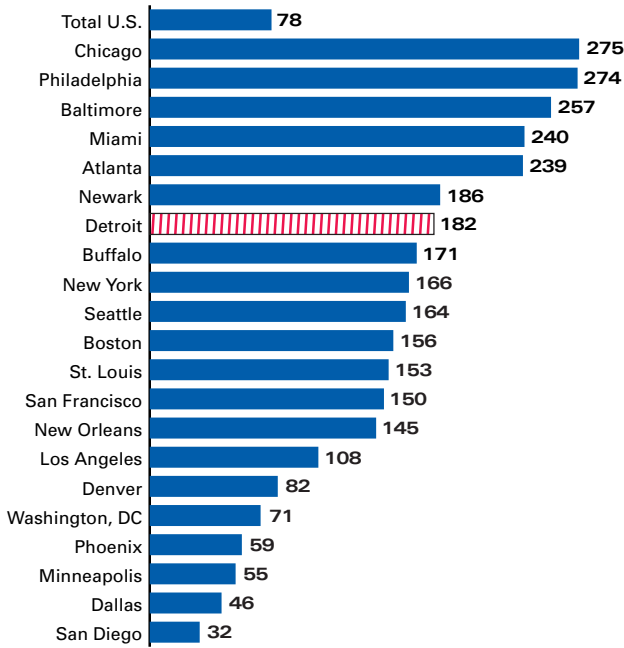


## Comparisons Across 21 Metropolitan Areas

The following figures show Detroit 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.

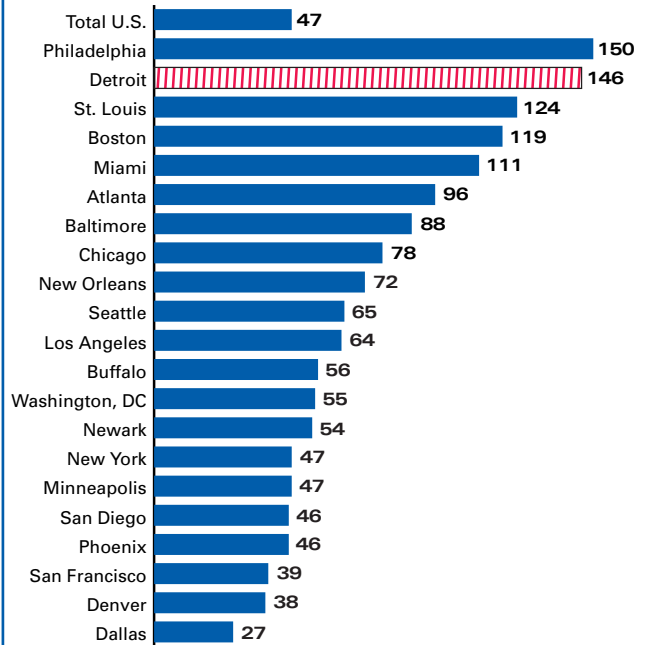
### Cocaine visits

Rate per 100,000 population, 2002



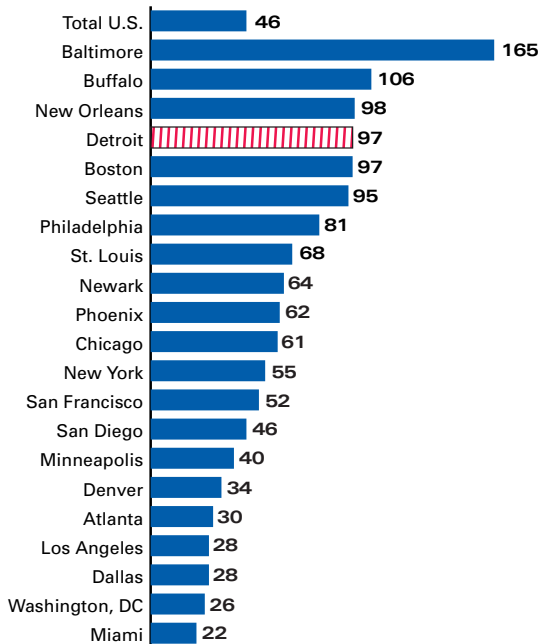
### Marijuana visits

Rate per 100,000 population, 2002



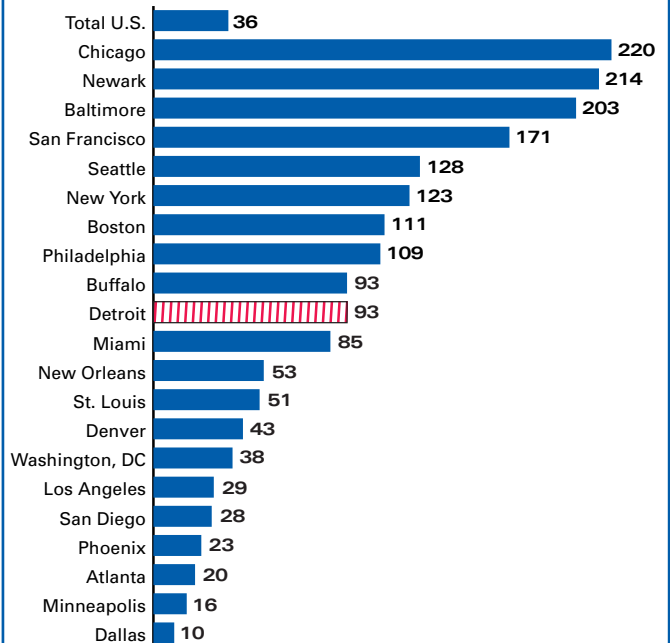
### Pain Reliever visits

Rate per 100,000 population, 2002



### Heroin 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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