# Annual Report 2021

## Leelanau, Mason, & Osceola County

This report is in memory of those who lost their life or a loved one to substance use.

These losses must motivate us all to prevent future deaths.

**Purpose:** This data was collected by the Office of the Medical Examiner (MEO) in the Department of Pathology at Western Michigan University Homer Stryker M.D. School of Medicine (WMed). Unless otherwise noted, data is from 2021 and includes deaths where drugs were the immediate cause of death. This report is meant to provide up to date statistics to those involved in efforts to reduce the number of drug-related deaths.

Sections with the following headings are approximations and frequencies may be higher than what is reported: Health Factors, Mental Health Factors, Social Factors, Children and Substance Use History.

**Sources:** All data was extracted from a Medical Examiner database, law enforcement (LE) reports, EMS runsheets, death certificates, obituaries, medical records, toxicology reports, and autopsy reports.

**Note:** Leelanau, Mason, and Osceola counties are combined to protect decedents' identities due to low count numbers (n<10) in each county.

<u>B</u>=Black/African-American; <u>W</u>=White; <u>F</u>=Female; <u>M</u>=Male

Please email questions to pathology@med.wmich.edu

Mason, Leelanau, & Osceola County

All drug-related deaths: Leelanau

Age	Race	Sex	Death certificate: Substances contributing to death	Injury zip code
33	W	M	fentanyl	49654
38	W	М	ethanol, hydroxyzine, nordiazepam	49670
41	W	M	acetyl-fentanyl, diphenhydramine, fentanyl, methadone, methamphetamine, morphine	49682
60	W	M	diphenhydramine, fentanyl	49664

All drug-related deaths: Mason

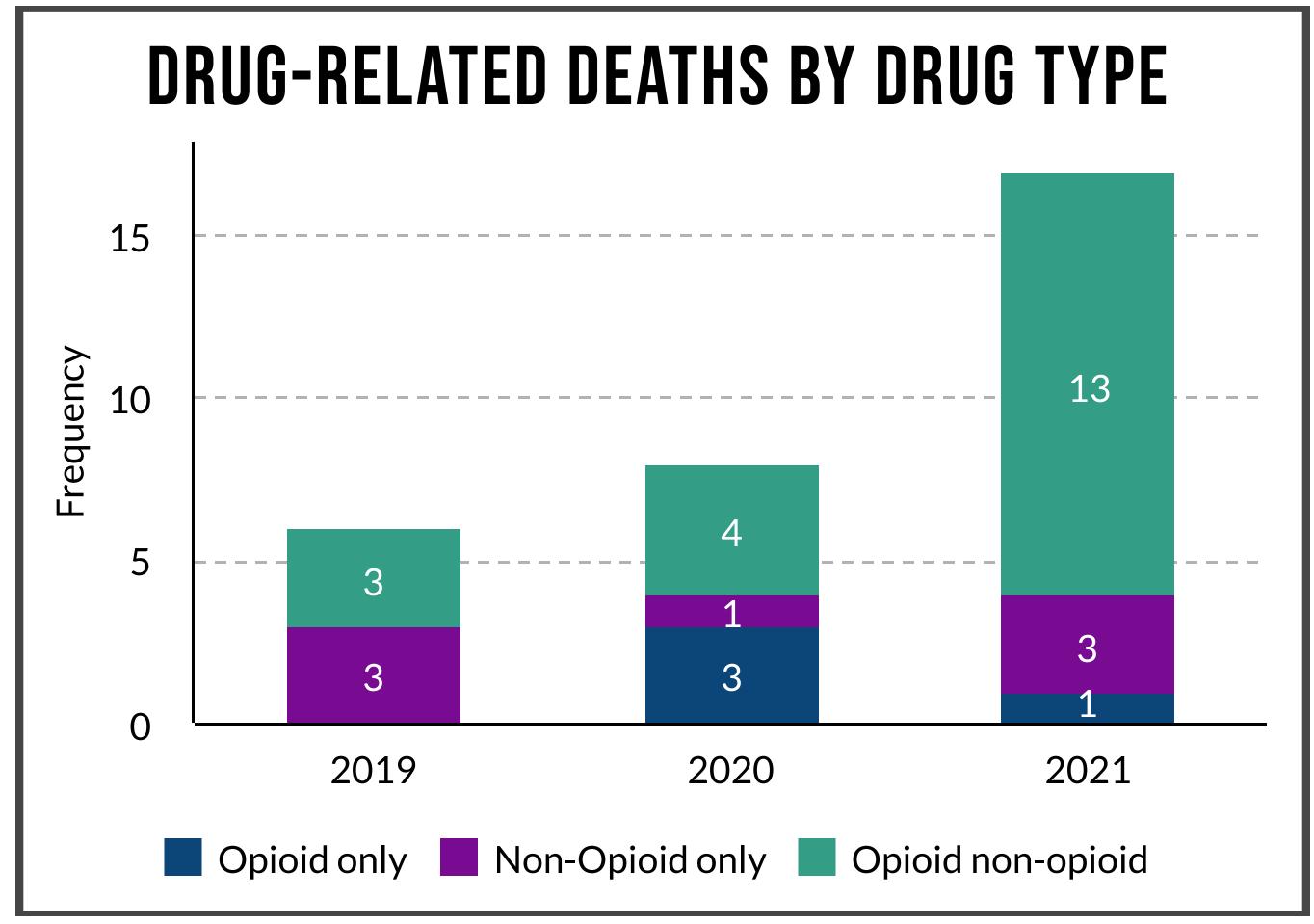
Age	Race	Sex	Death certificate: Substances contributing to death	Injury zip code
27	W	F	amitriptyline, citalopram, fluoxetine, mirtazapine, topiramate	49431
28	W	М	fentanyl, methamphetamine	49454
35	W	М	alprazolam, fentanyl, methamphetamine, mitragynine, para-fluorofentanyl	49431
35	W	М	cocaine, fentanyl, methamphetamine	Unknown
36	W	М	fentanyl, methamphetamine, para-fluorofentanyl	49431
38	W	F	buprenorphine, bupropion, methamphetamine, venlafaxine	49431
57	W	F	7-aminoclonazepam, acetyl-fentanyl, cocaine, fentanyl	49431
69	W	F	diphenhydramine, duloxetine, oxycodone, topiramate	49449

All drug-related deaths: Osceola

Age	Race	Sex	Death certificate: Substances contributing to death	Injury zip code
32	W	М	fentanyl, methamphetamine	49631
34	W	М	fentanyl, cyclobenzaprine, methamphetamine, para-fluorofentanyl, xylazine	49655
51	W	М	fentanyl, methamphetamine, methadone, tramadol	49631
53	В	M	fentanyl, methamphetamine	49639
61	W	М	methamphetamine	49677

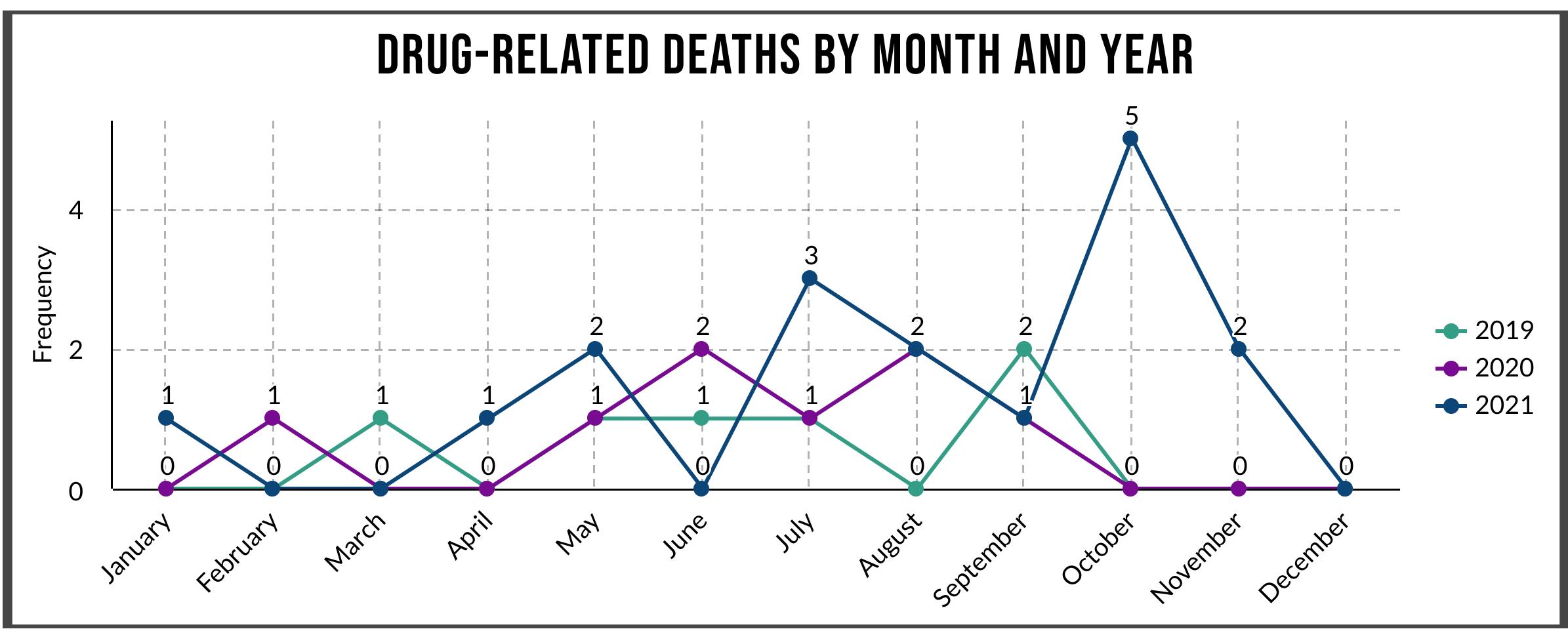
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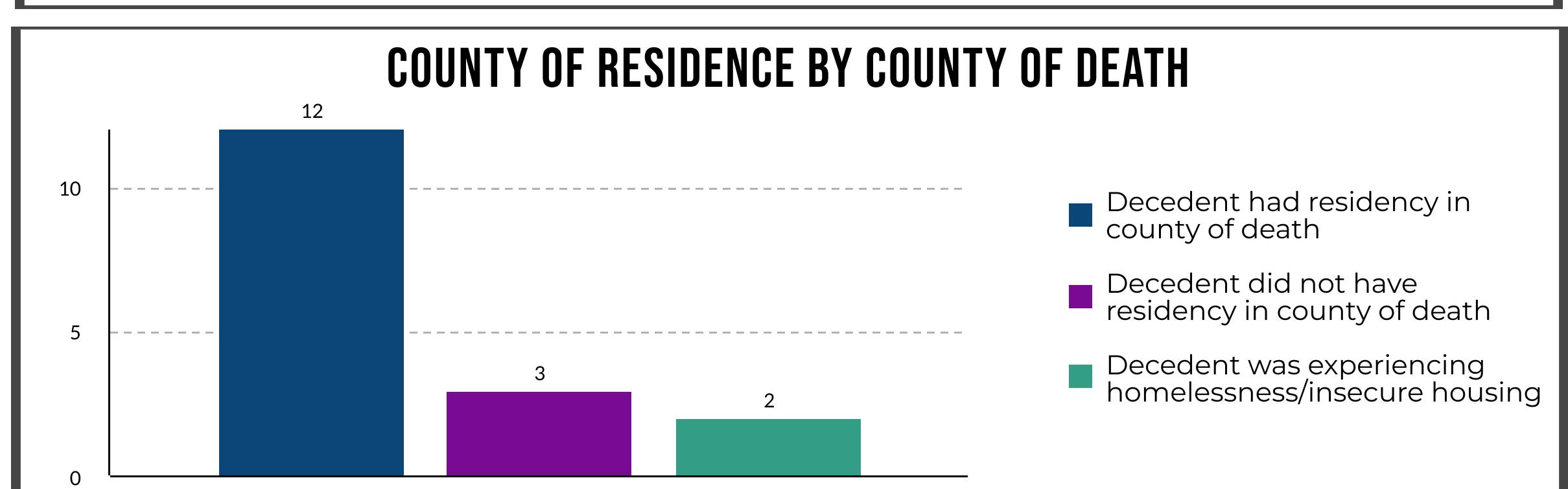
## Total Drug-Related Deaths



Year	Total deaths	Deaths per 10,000
2019	6	0.8
2020	8	1.1
2021	17	2.3

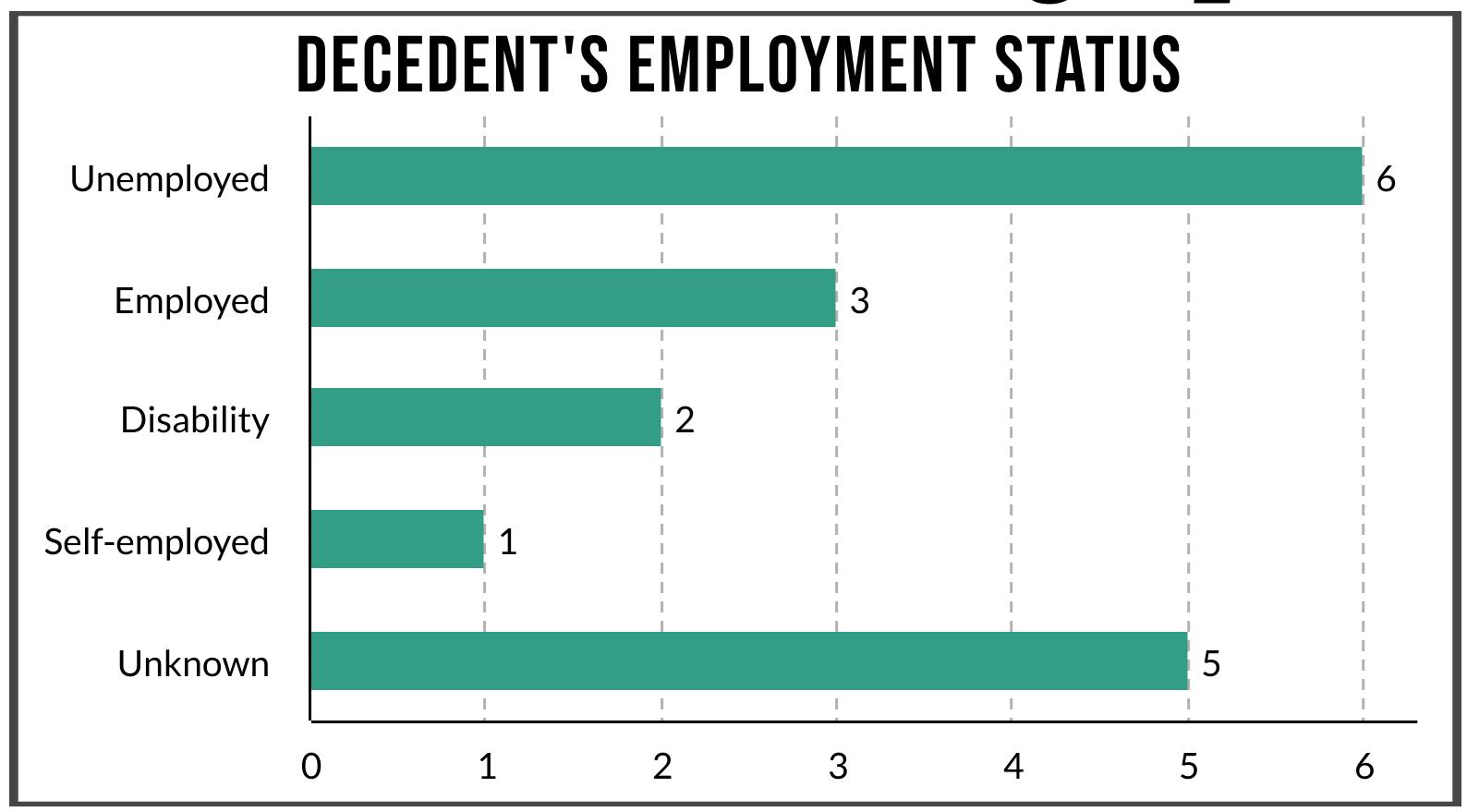


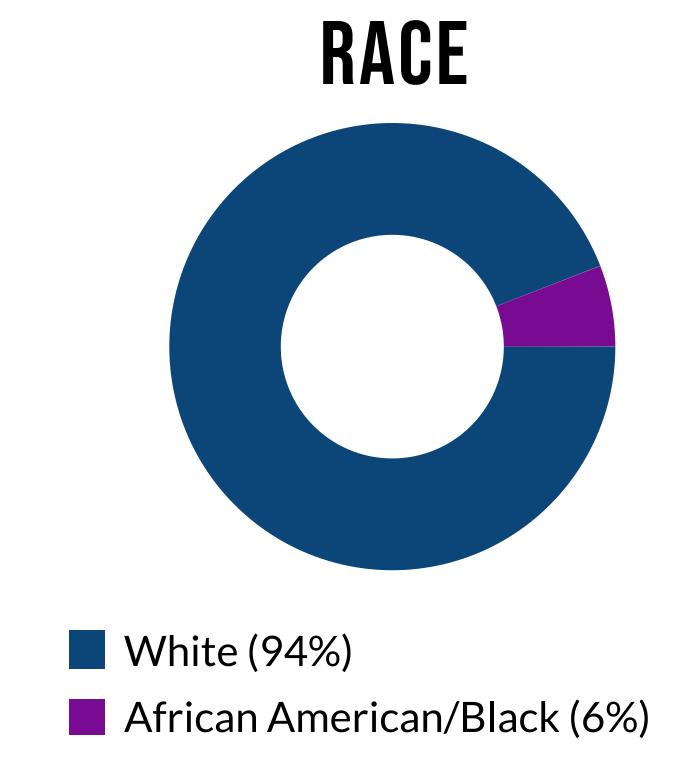




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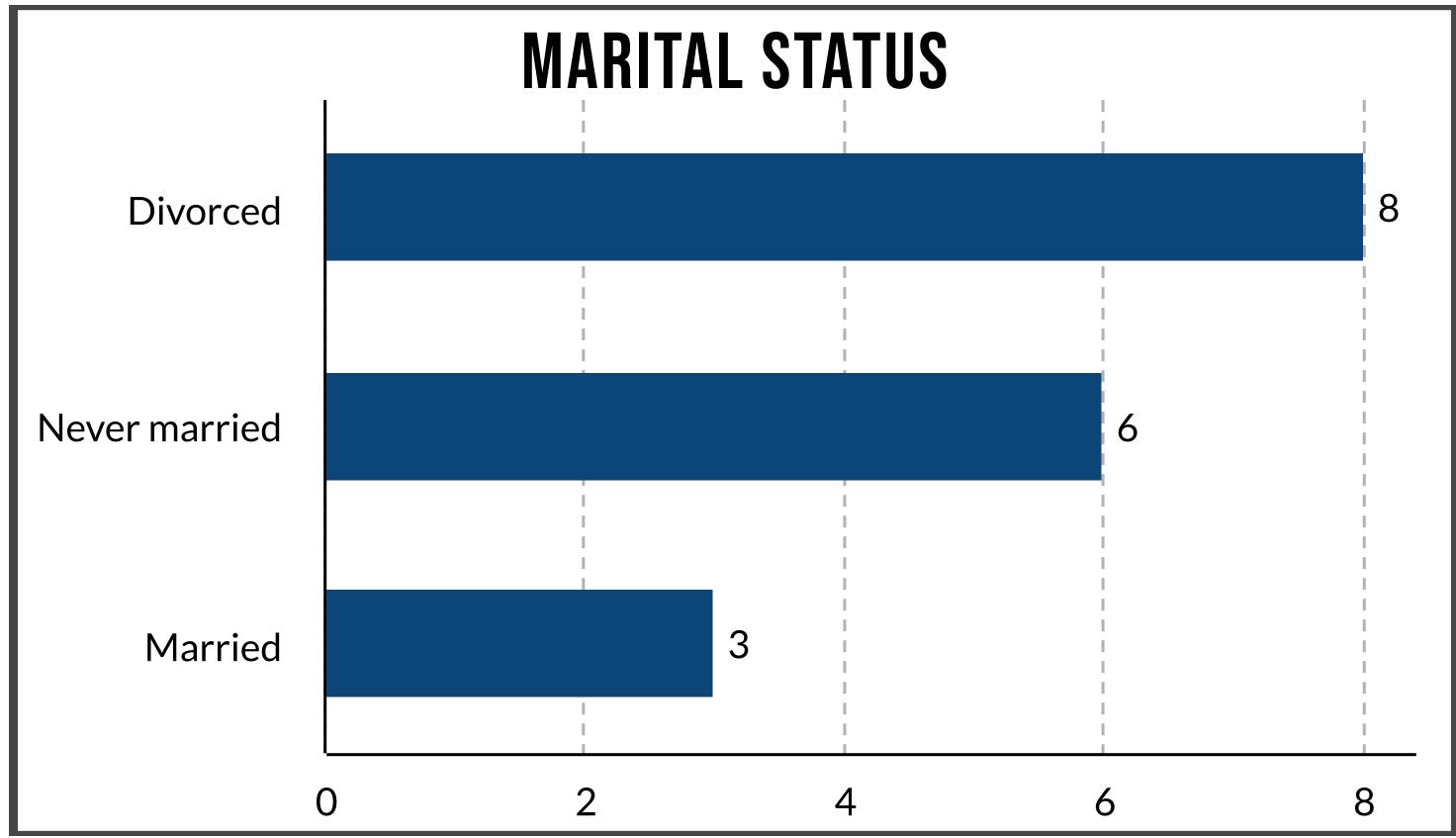
## <u>Demographics</u>



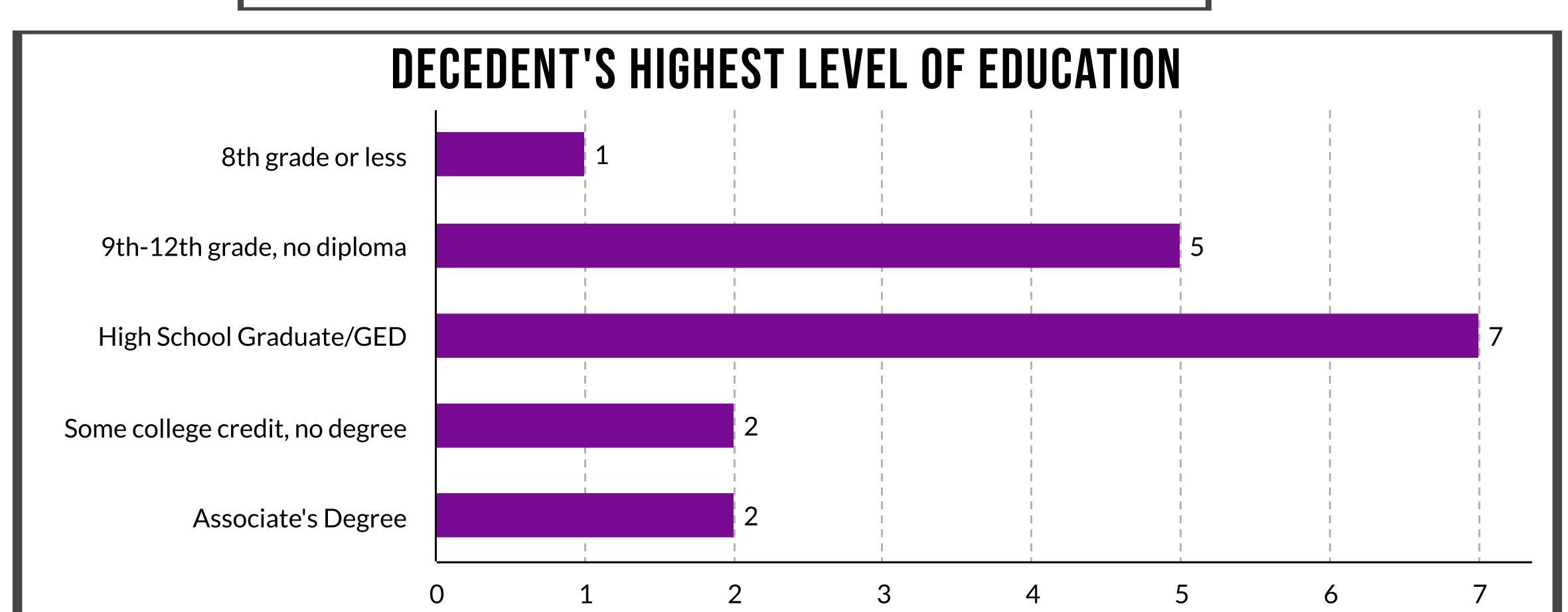






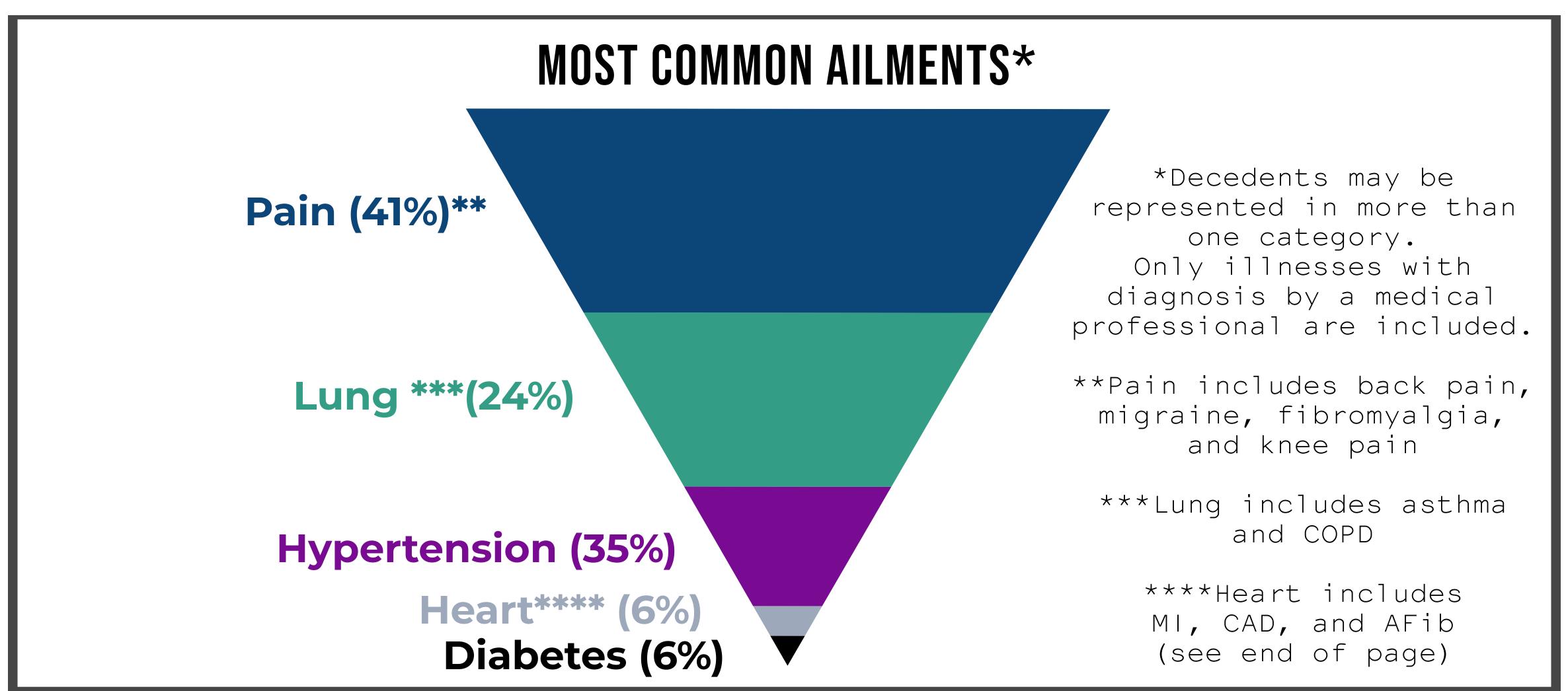






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## Health Factors



At least 2 decedents were Hepatitis C positive

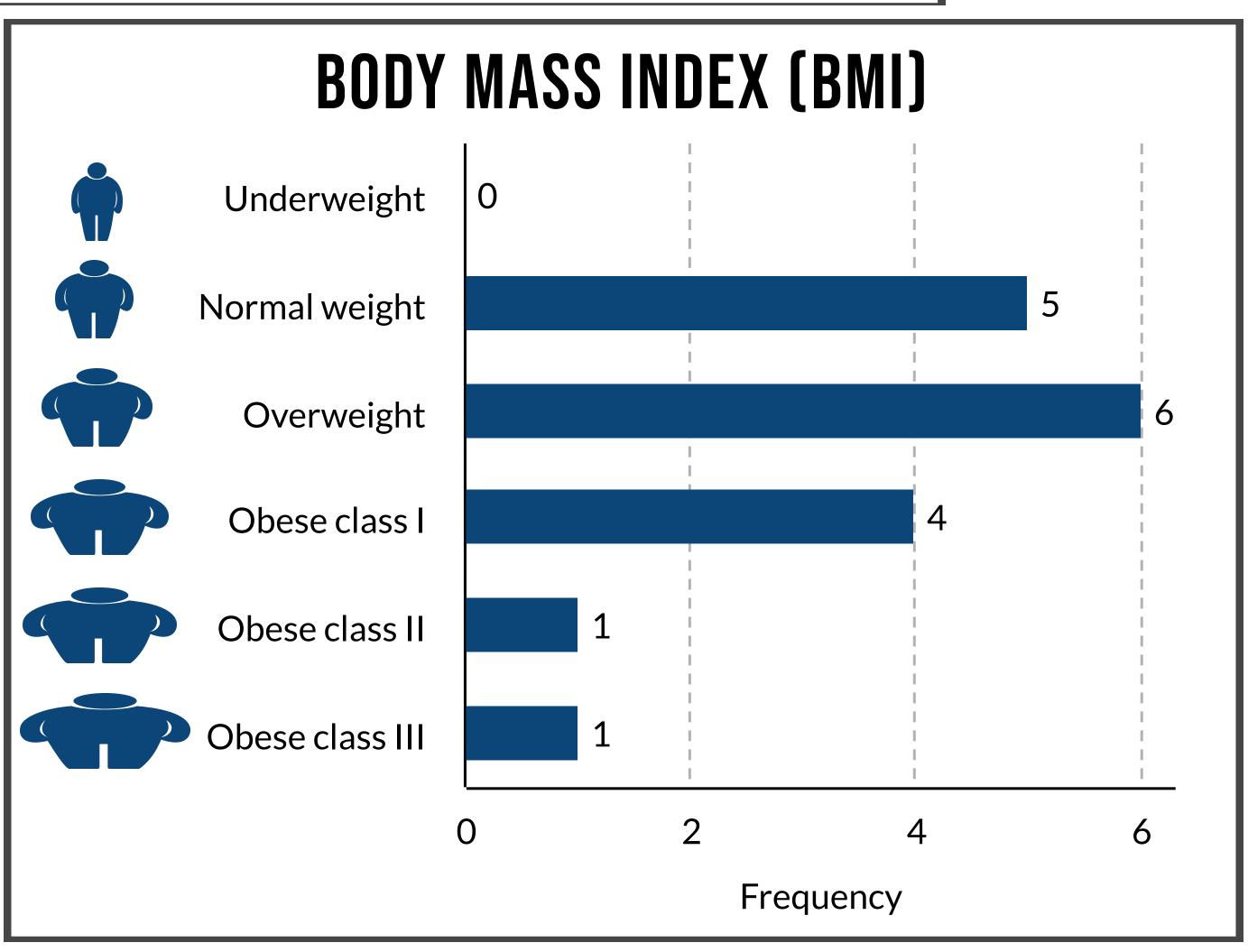
1 of these decedents was known to use substances intravenously

Decedent drank alcohol\*

\*Moderate to heavy use

Decedent had a PCP\*

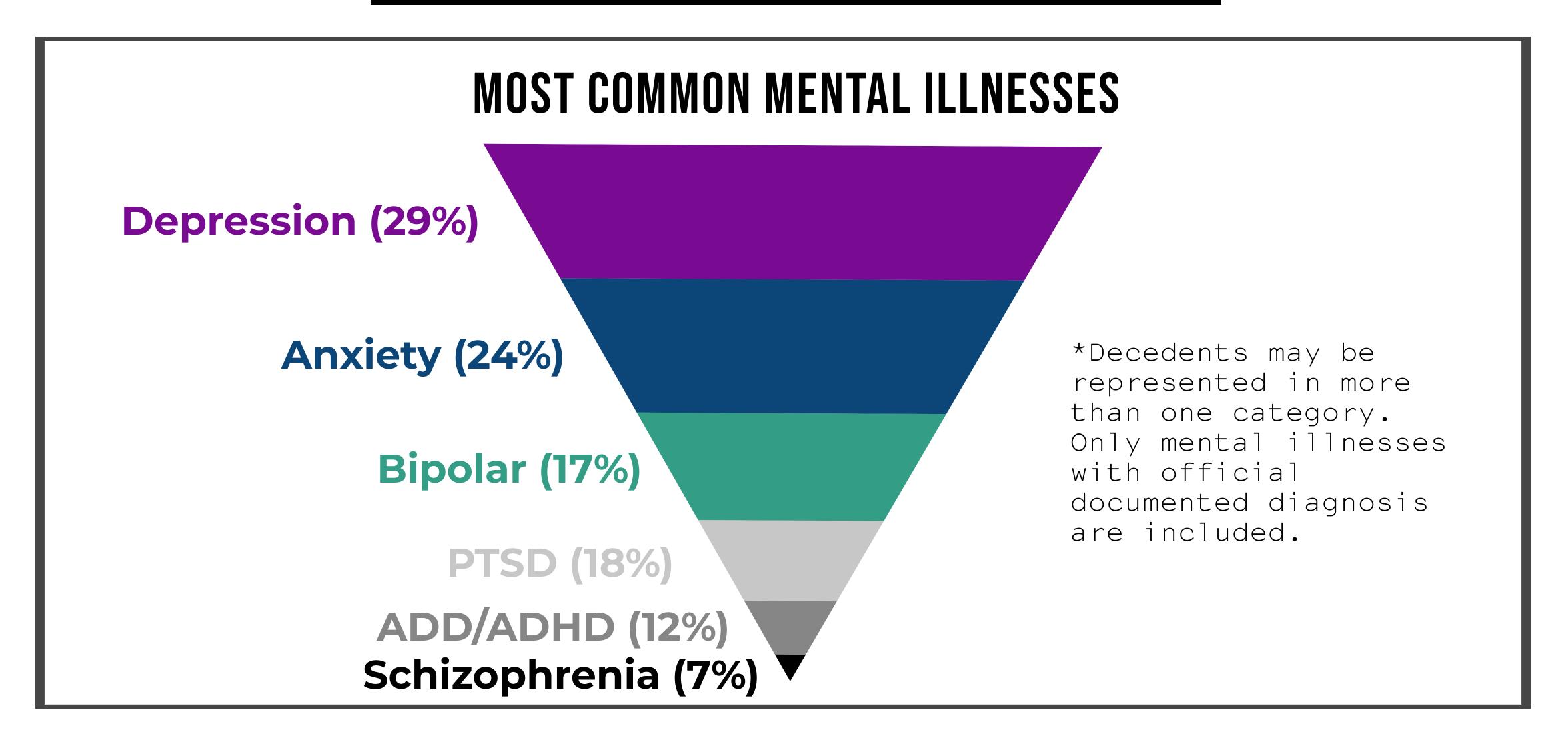
\*Primary care physician



COPD=Chronic obstructive pulmonary disease; MI=Myocardial infarction; CAD=Coronary artery disease; AFib=Atrial fibrillation

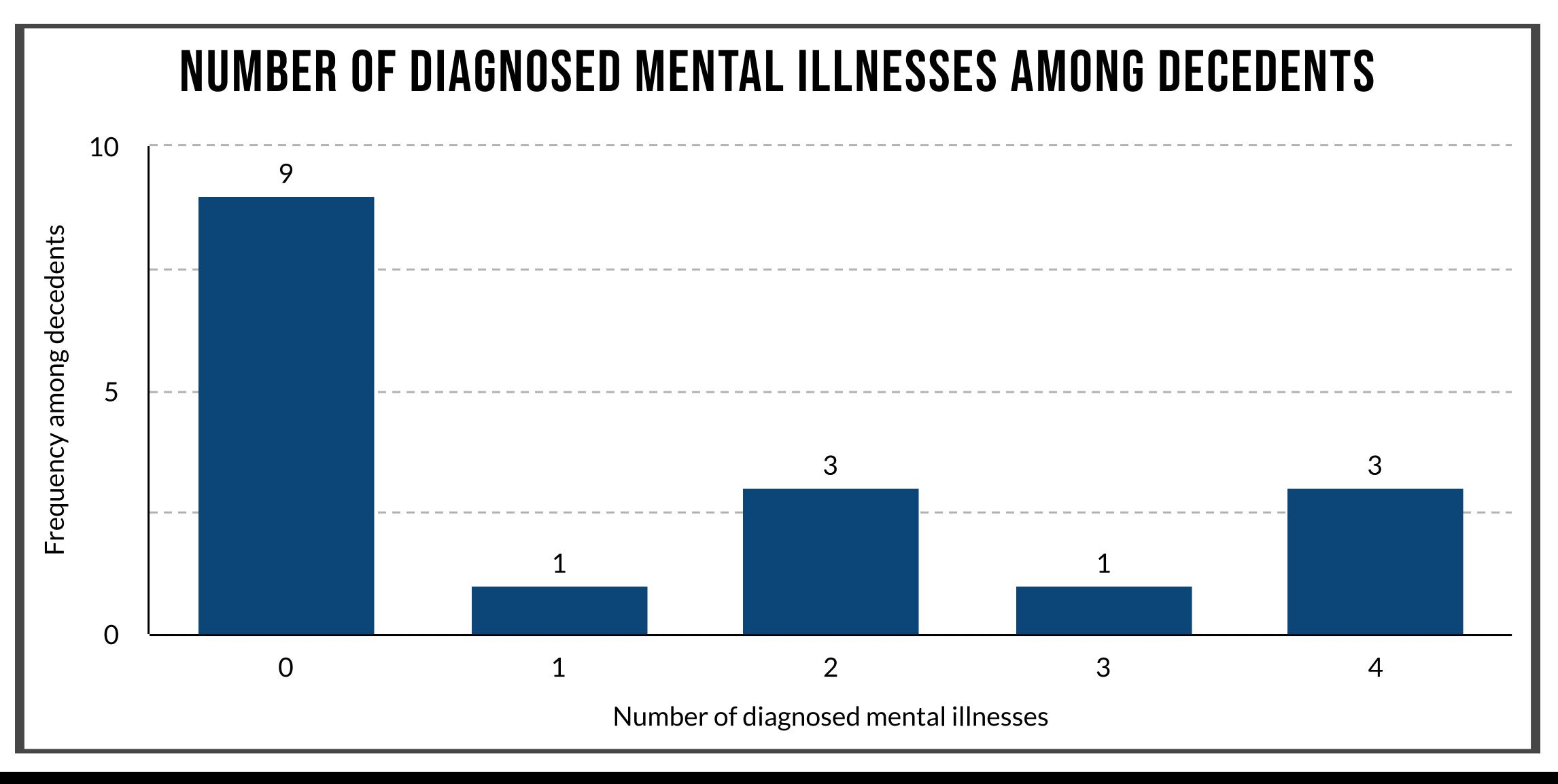
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## Mental Health Factors



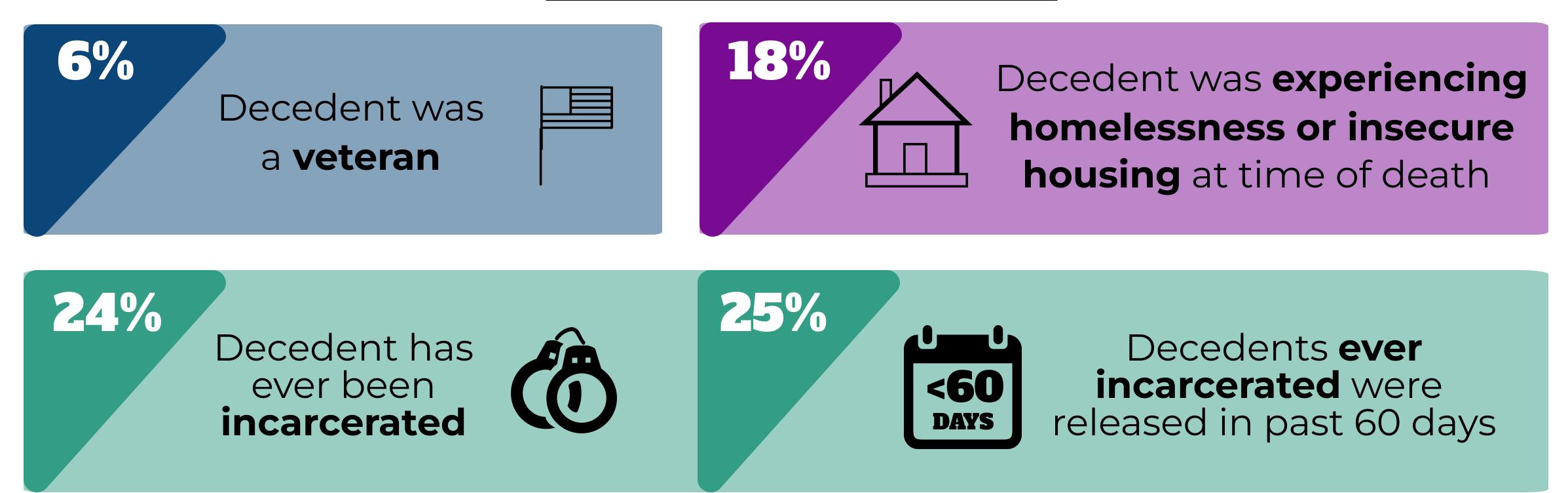
#### PERCENTAGE OF DECEDENTS



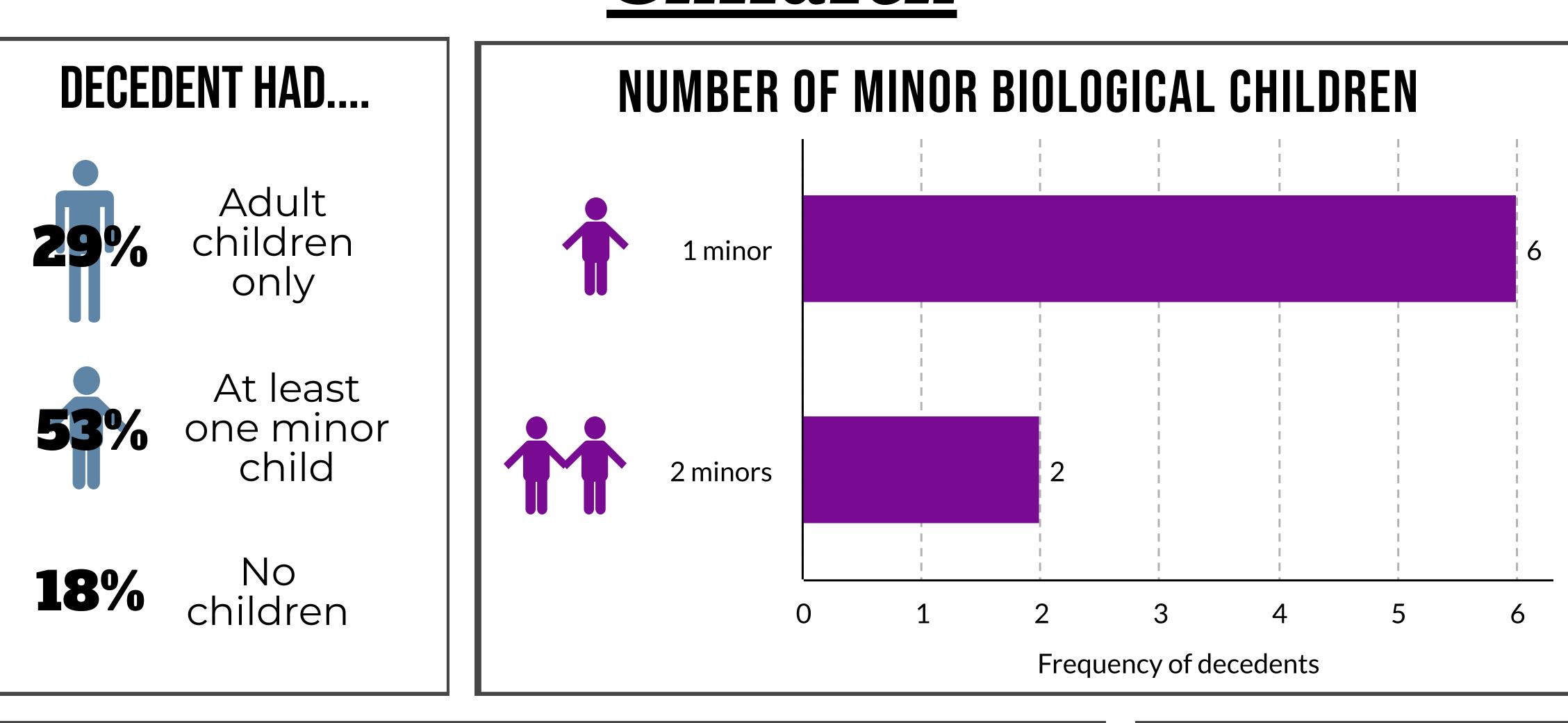


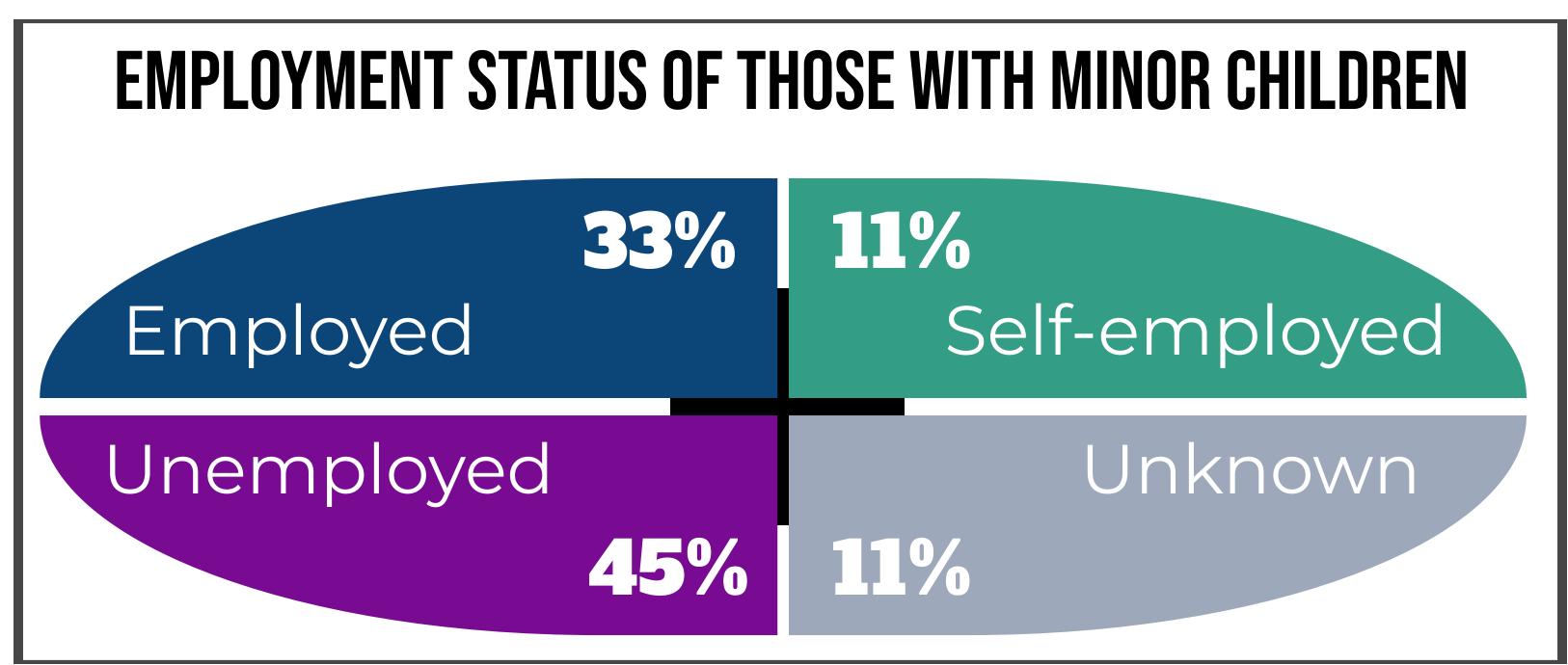
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## Social Factors



## Children

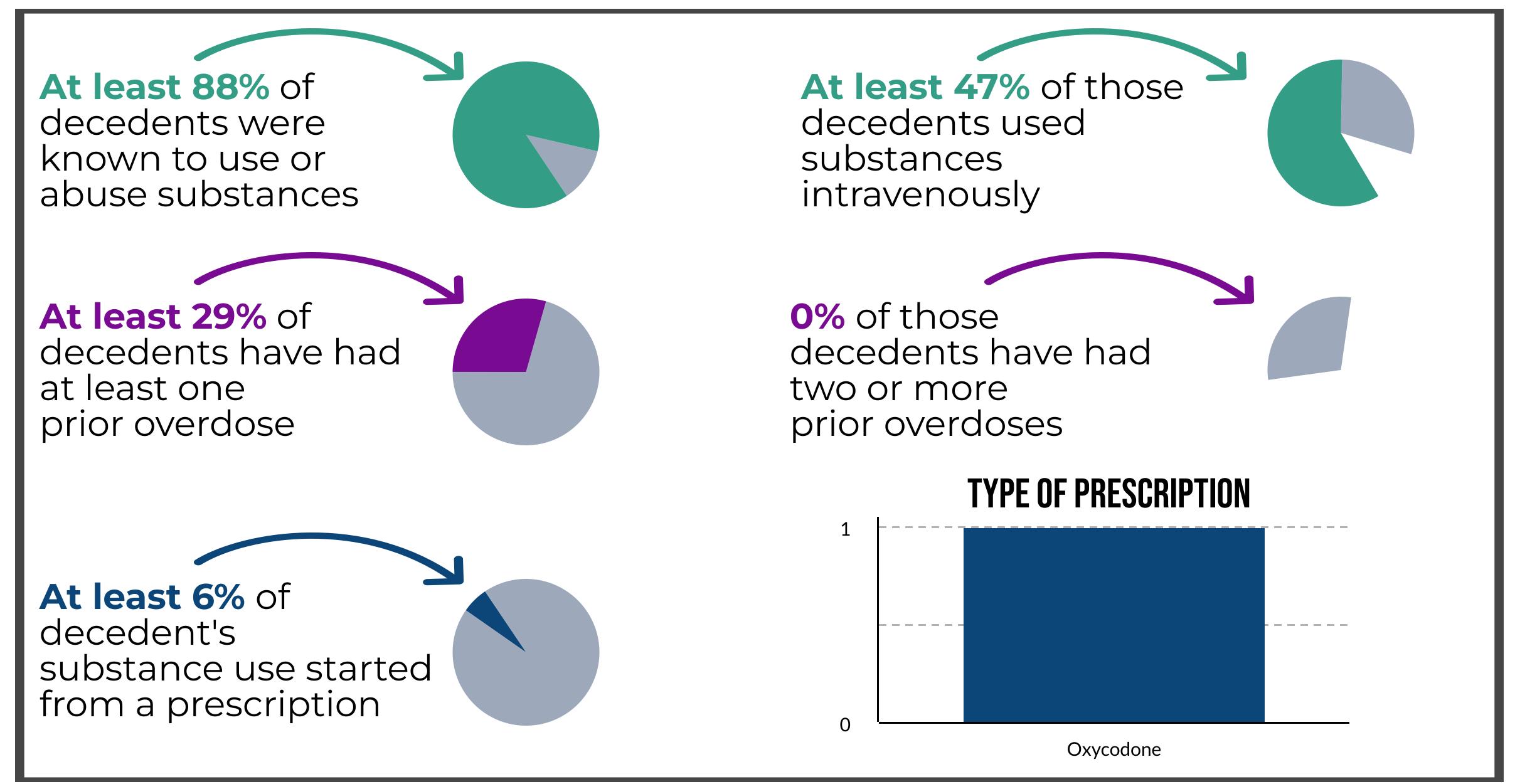


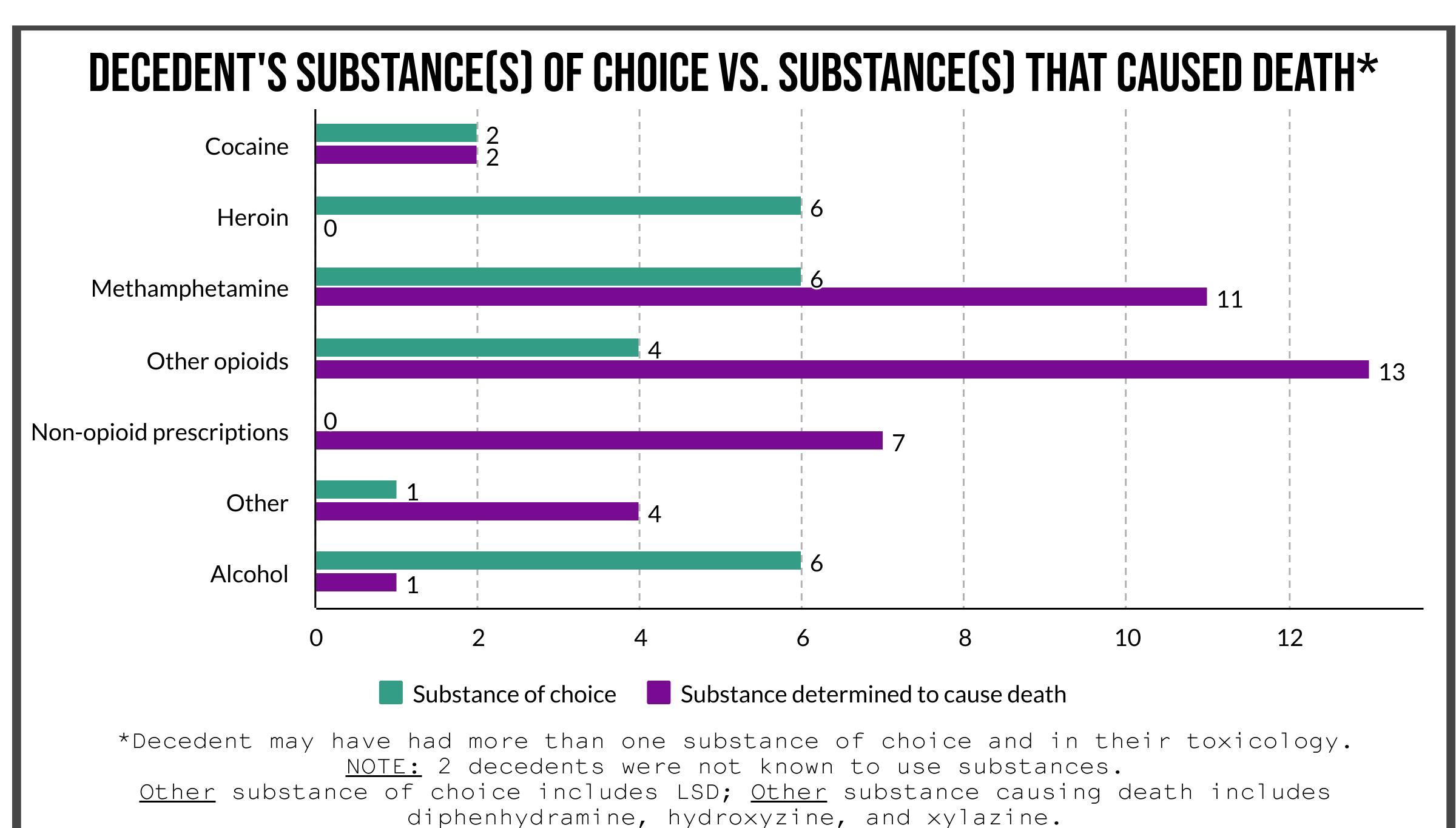


At least 1 decedent lived with their minor child(ren) at time of death

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## Substance Use History





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## Substance Use History, cont.

#### PREFERRED METHOD OF ADMINISTRATION\*

Method	Male (n=11)	Female (n=3)	White (n=14)	Total (n=14)**
Intravenous	7	2	9	9
Snort	2	٦	3	3
Smoke	2	7	3	3
Transdermal	O	O	O	O
Huff	O	0	O	0
Oral	2	2	4	4
Unknown	2	0	2	2

<sup>\*</sup>Decedent may have had more than one preferred method of administration. Only includes decedents with a substance use history (n=15). \*\*Decedent of African-American descent is excluded (n=1).

### RECOVERY HISTORY (N=15)\*

20%

Decedent has been to a treatment clinic or detox center at least one time

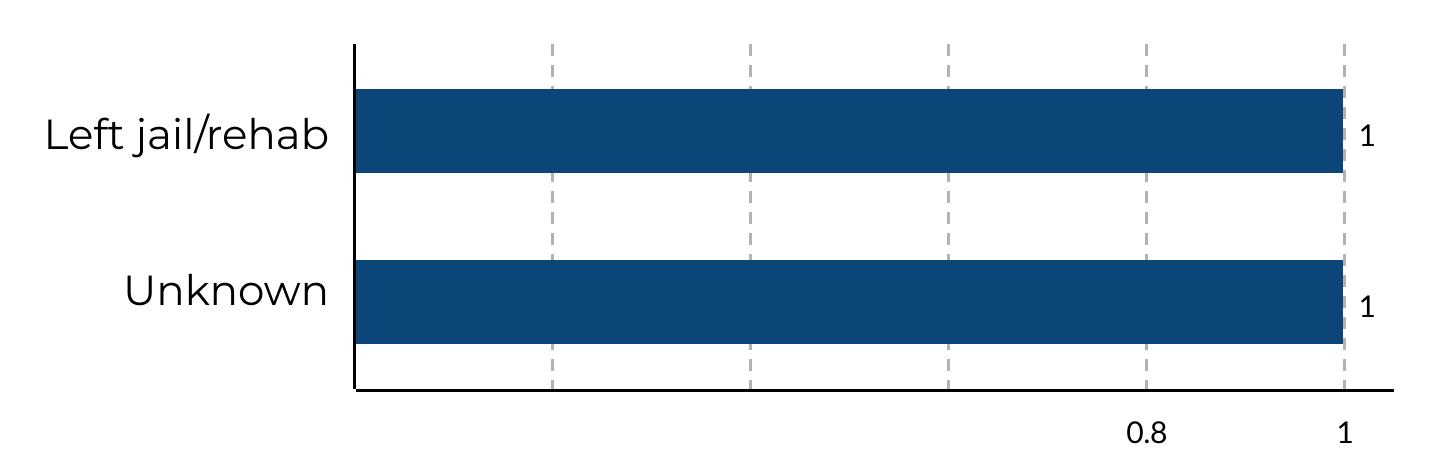
Decedent was recently reportedly **substance free** in the past three weeks



27%

Decedent was currently receiving or has received medication for opioid use disorder in the past two years

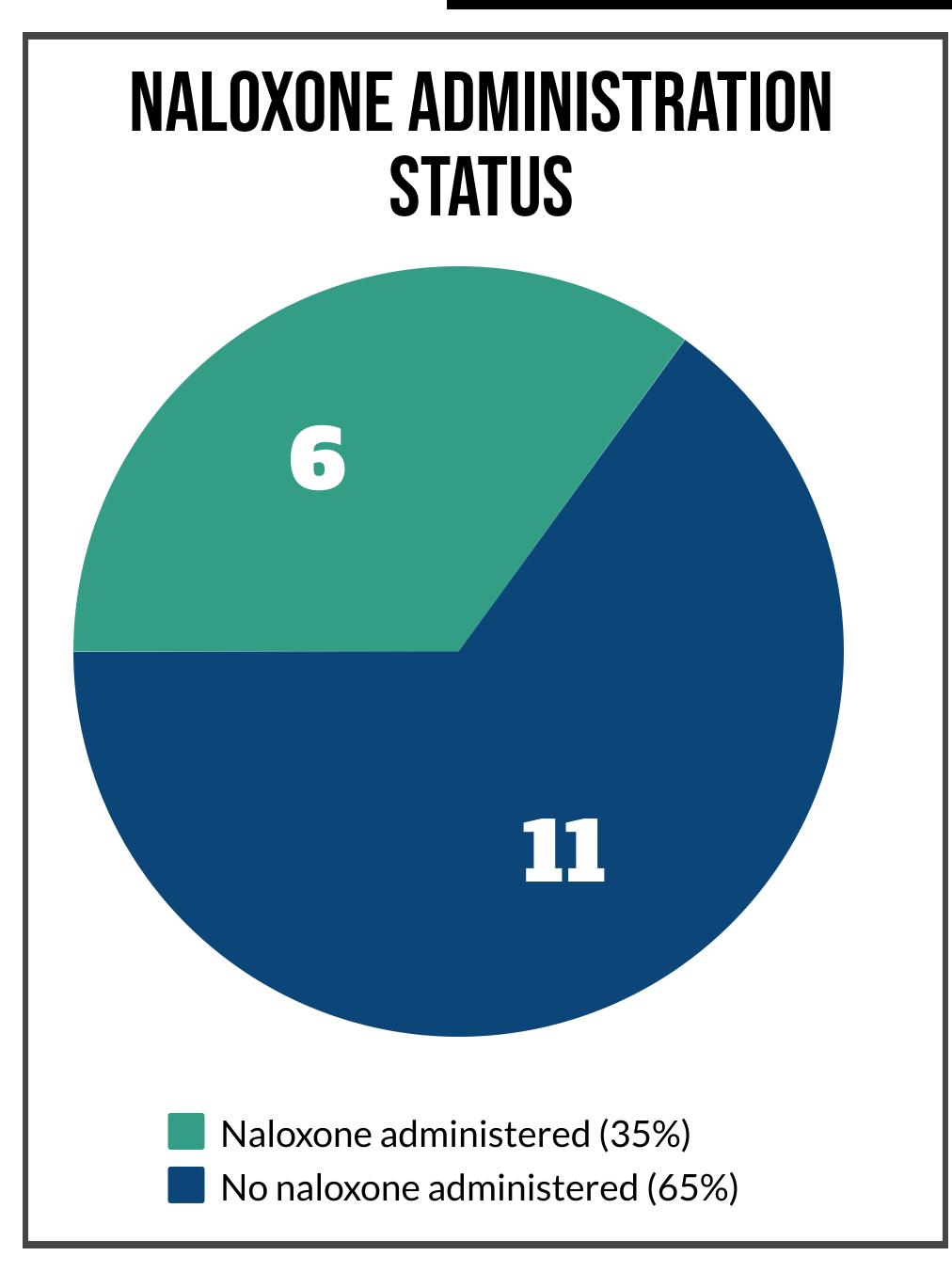
#### SUSPECTED REASON FOR RELAPSE\*\*

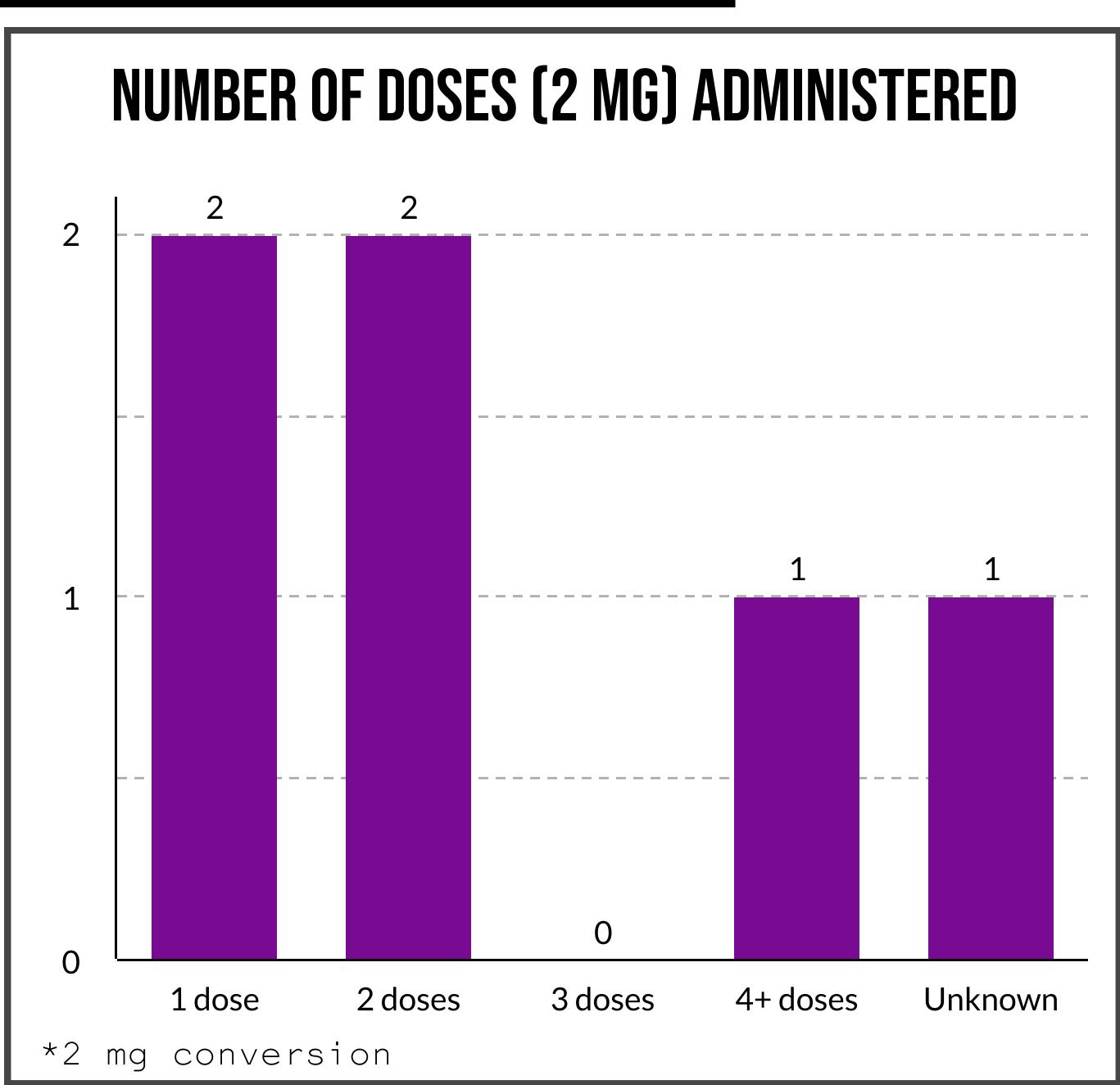


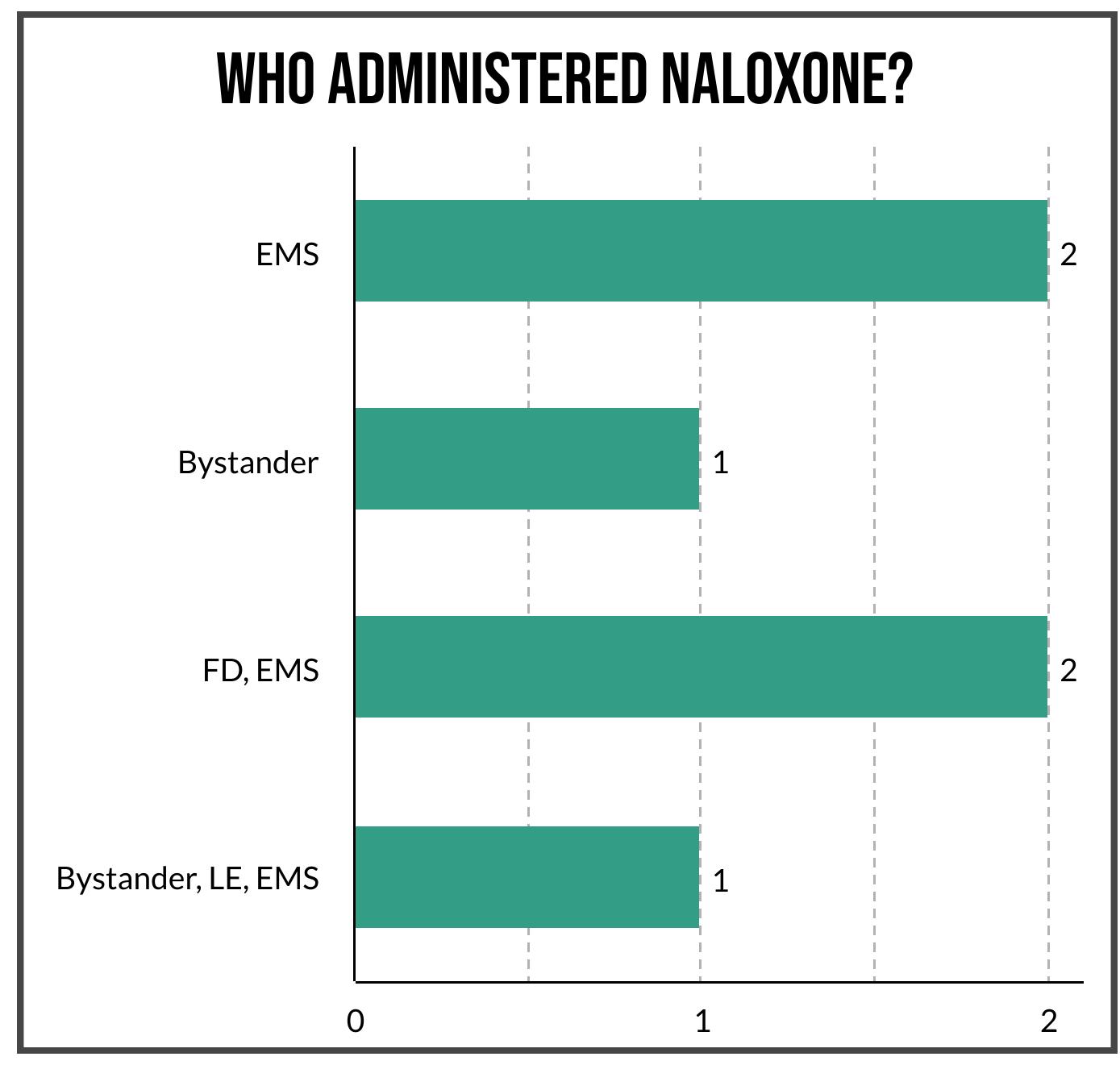
\*ONLY Decedents known to use substances are included.

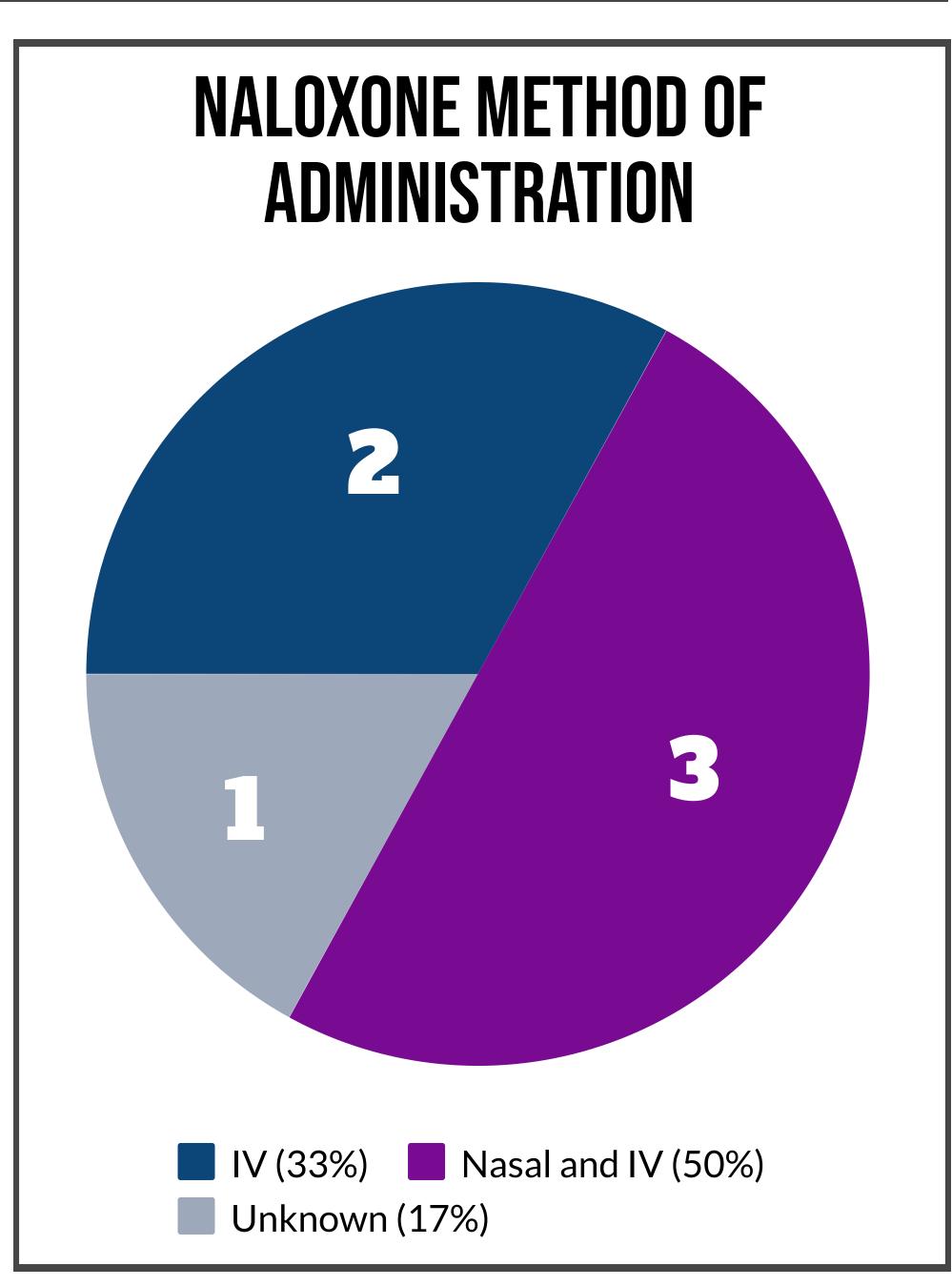
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## Naloxone Administration









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## Death Scene Findings



35%
Were found by family



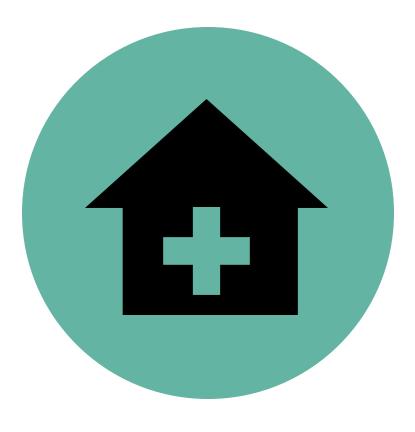
6%
Were found
by a minor



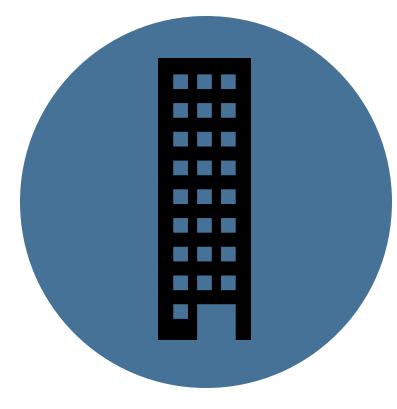
6%
Were found on welfare check



59%
Died at their residence



0%
Died at the hospital



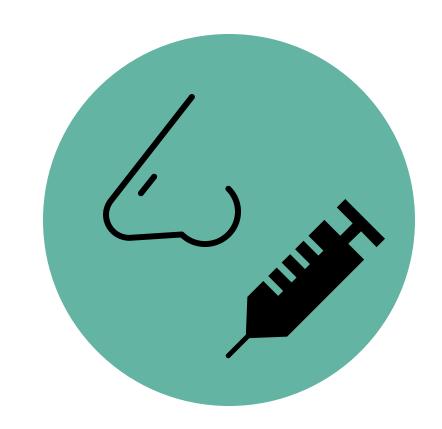
6%
Died at a hotel/motel



29%
Medication was found on scene



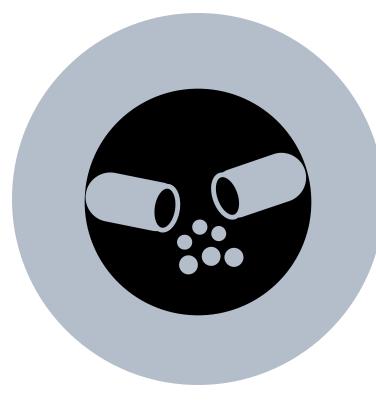
47%
Syringes were found on scene



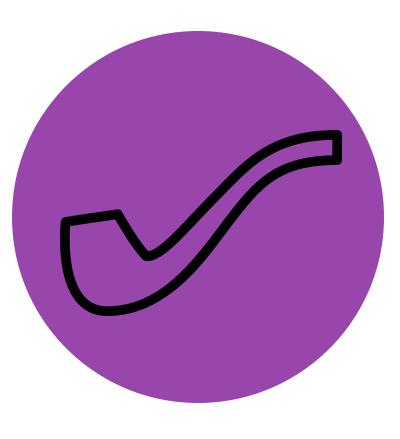
24%
Had Narcan on scene



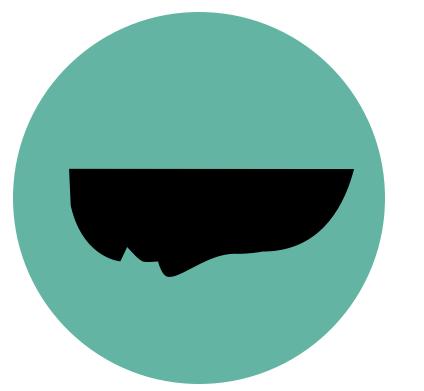
88% Suspected overdose before autopsy



47%
Suspected illicit substance(s) were found on scene



6%
Pipes were found on scene



18%
Decedent was found face down



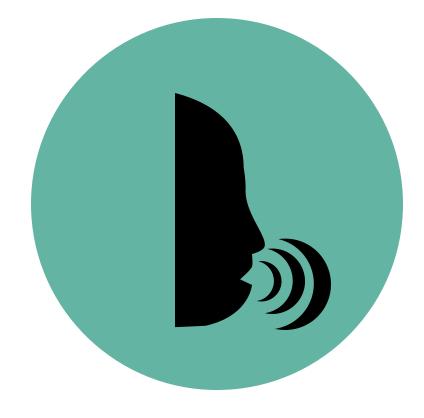
71%
Were dead
upon EMS
arrival



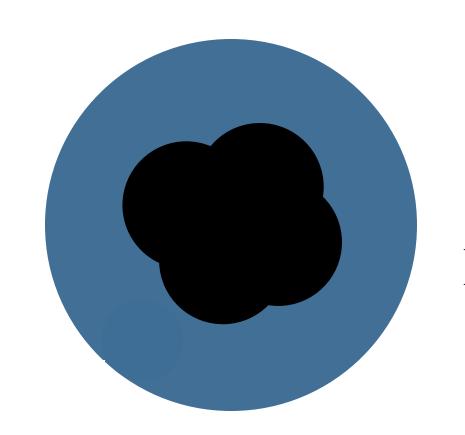
88%
Used the fatal substance(s)
alone



0%
Decedent was
snoring



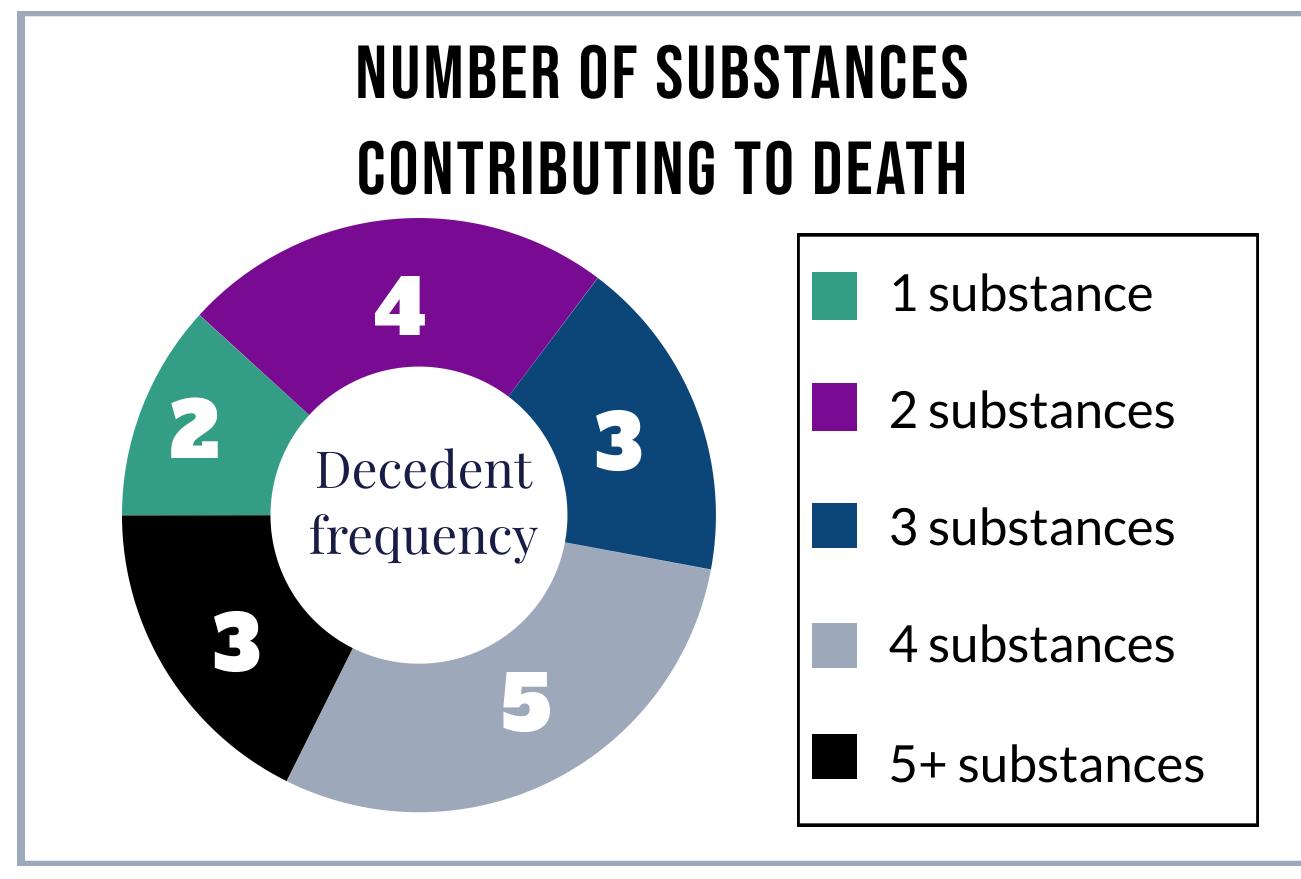
0%
Decedent was
making
gurgling sounds

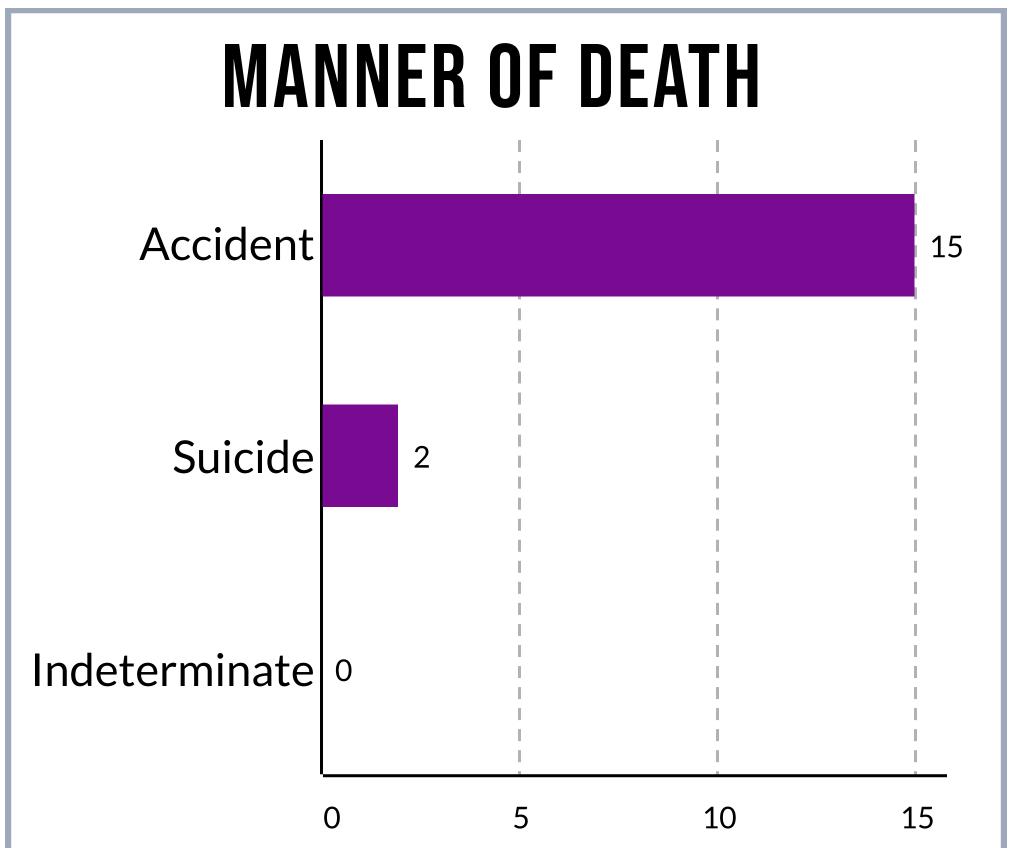


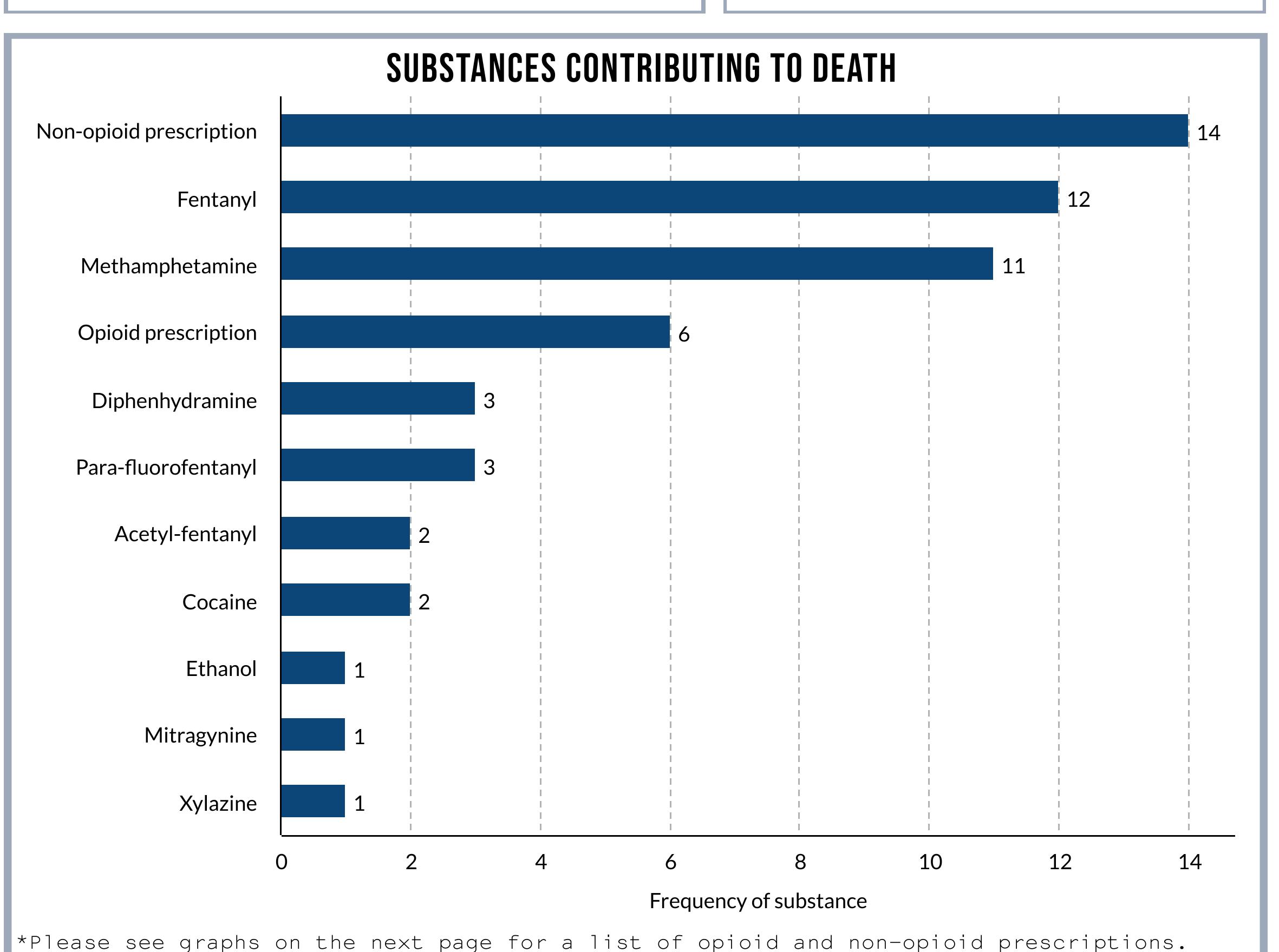
12%
Decedent had
foam cone

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## Autopsy and Toxicology Results

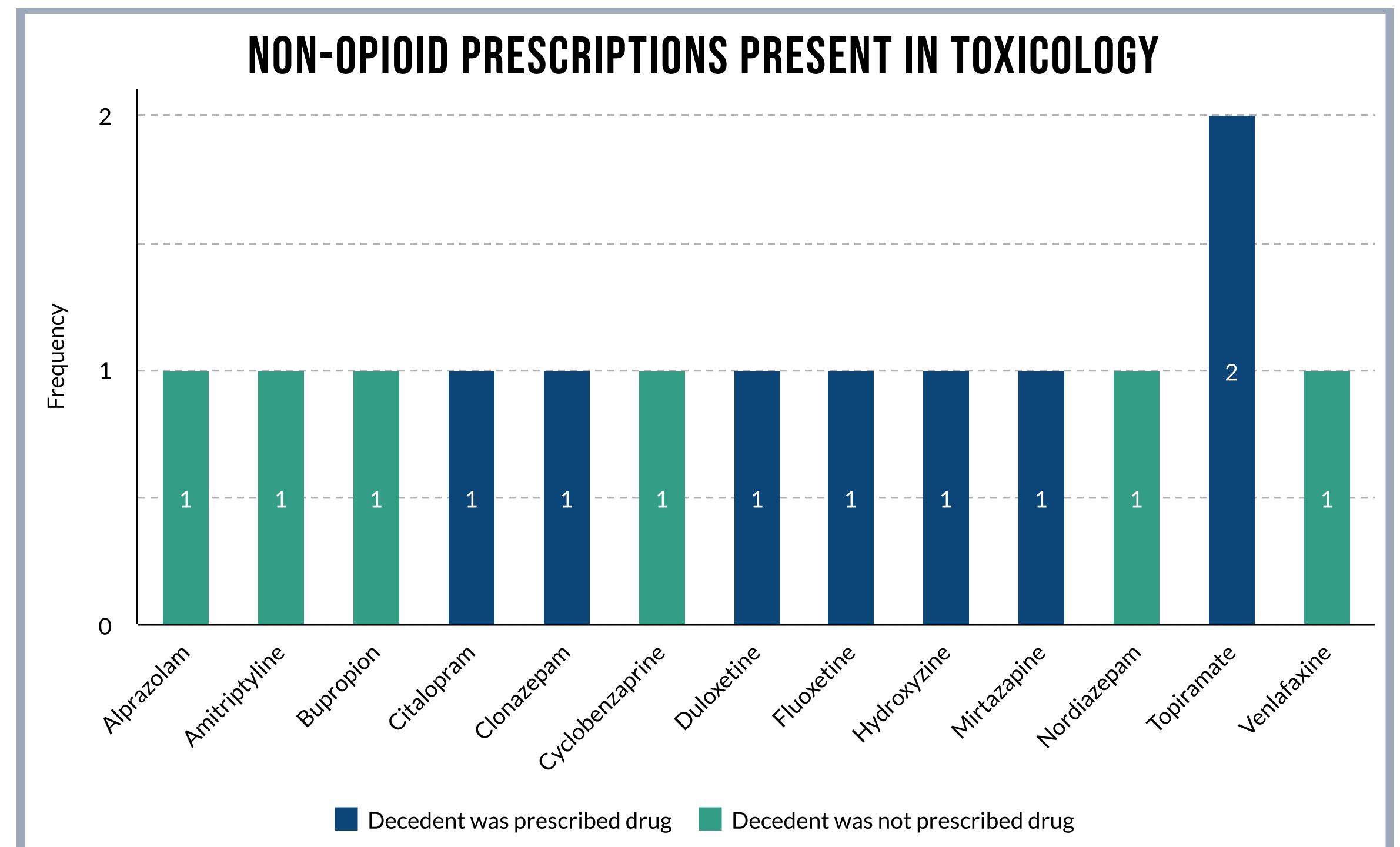


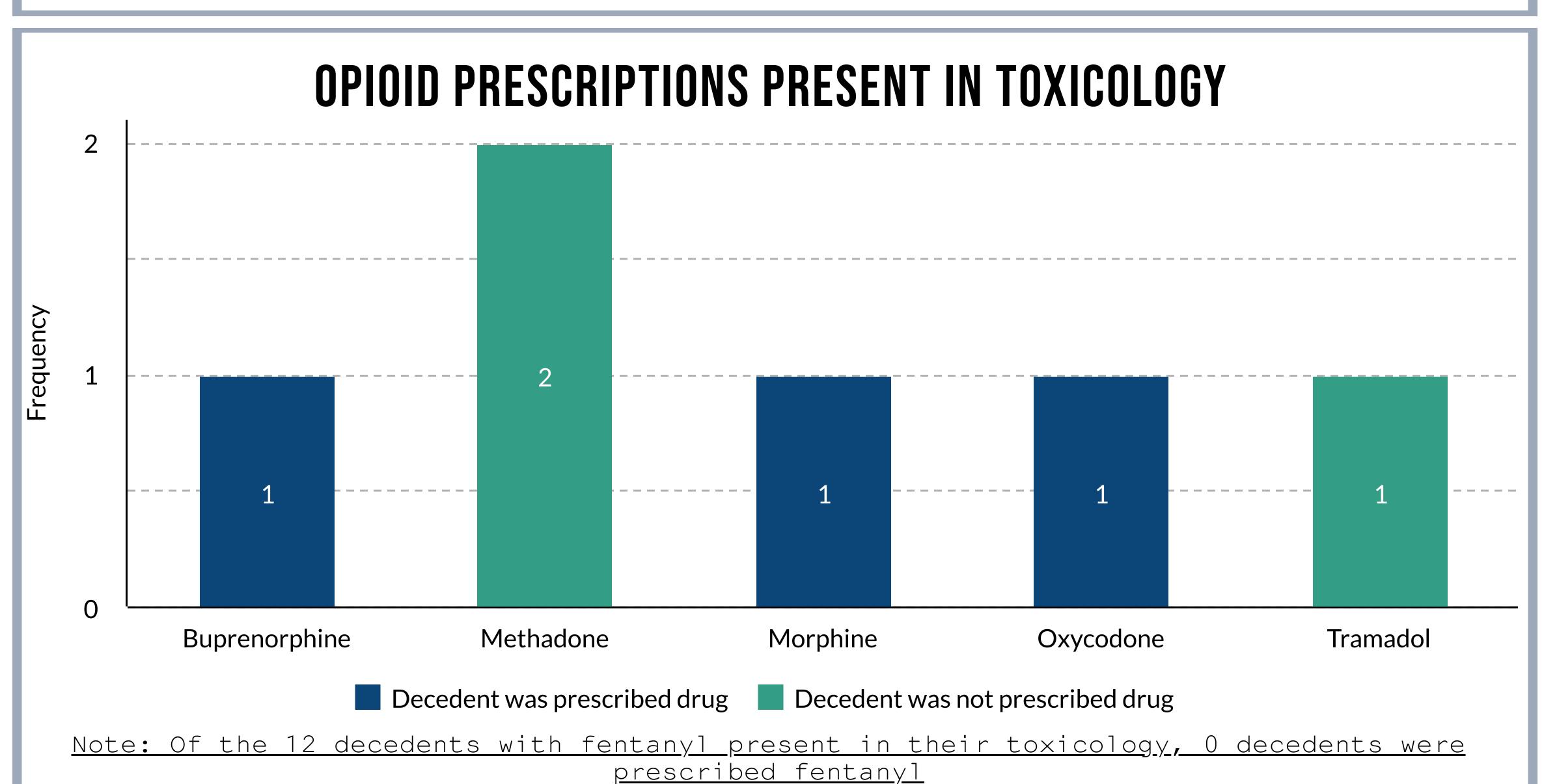




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## Autopsy and Toxicology Results, cont.





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## Highlights OPIOIDS AND POSITIONAL ASPHYXIA

14% (2 of 14) of decedents who died due an opioid were originally found in a potentially airway compromising position

These positions include decedent drowning or decedent found face down on the floor, their bed, or on another surface

o% (o of 3) of decedents who died due to only non-opioid substance(s) were originally found in a potentially airway compromising position

Opioids depress the respiratory system and when coupled with positional asphyxia, there may be an increase risk of death. This MEO suggests that those who use substances not use alone and to ensure they are not at risk for slumping forward onto their face.

#### **NOVEL SUBSTANCES**



- Only approved use is for veterinarian medicine in horses, cattle, etc.
- Used for sedation, anesthesia, muscle relaxation, and analgesia

### Para-Fluorofentanyl 3 deaths

- Analogue of fentanyl that causes similar effects to fentanyl
- Reportedly more toxic than fentanyl but provides lower levels of pain mitigation
- No approved medical use in the United States

## Acetyl-Fentanyl

2 deaths

- Analogue of fentanyl
  Stronger than morphine but weaker than fentanyl
- No approved medical use in the United States

#### SUBSTANCE COMBINATIONS

#### HEROIN & FENTANYL

o decedents had heroin in their toxicology

#### BENZODIAZEPINES & OPIOIDS

2 decedents had a benzodiazepine and an opioid in their toxicology

Neither decedent were prescribed the opioid and benzodiazepine

#### XYLAZINE & FENTANYL

1 decedent had xylazine in their toxicology

This decedent also had fentanyl in their toxicology

#### METHAMPHETAMINE & OPIOIDS

12 decedents had methamphetamine and opioid(s) in their toxicology

11 decedents had methamphetamine and fentanyl in their toxicology