Annual Report 2021

Van Buren 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: <u>W/AI</u>: White/American Indian; <u>W</u>=White; <u>F</u>=Female; <u>M</u>=Male

Please email questions to pathology@med.wmich.edu

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All drug-related deaths

Age	Race	Sex	Death certificate: Substances contributing to death	Injury Zip code
26	W	М	ethanol, fentanyl	49064
27	W	F	methamphetamine	49057
32	W	М	amphetamine, ethanol, fentanyl	49047
32	W	F	7-amino clonazepam, alprazolam, cocaine, fentanyl, hydrocodone, morphine	49090
33	W	М	methamphetamine	49079
35	W	М	fentanyl, gabapentin, mitragynine	49079
38	W	М	acetyl fentanyl, fentanyl, methamphetamine, para-flourofentanyl	49045
39	W	F	amitriptyline, methamphetamine, tramadol	49079
40	W/AI	М	ethanol, fentanyl, heroin, methamphetamine	49026
41	W	М	fentanyl, para-fluorofentanyl	49079
42	W	М	clonazepam/7-amino clonazepam, fentanyl, oxycodone	49071
45	W	F	cyclobenzaprine, ethanol, lorazepam, morphine	49026
48	W	М	fentanyl, methadone, morphine, para-fluorofentanyl	49013
49	W	М	acetyl-fetanyl, alprazolam, clonazepam, fentanyl, methamphetamine	49043
51	W	М	hydroxyzine, mirtazapine, sodium nitrite	49027
51	W	М	Pt. 1: inferior right temporal lobe hemorrhage with subarachnoid hemorrhage; Pt. II: methamphetamine*	49056
54	W	F	fentanyl	49090
55	W	М	methamphetamine	49045
58	W	М	Pt. I: hypertensive cardiovascular disease; Pt. II: methamphetamine*	49026

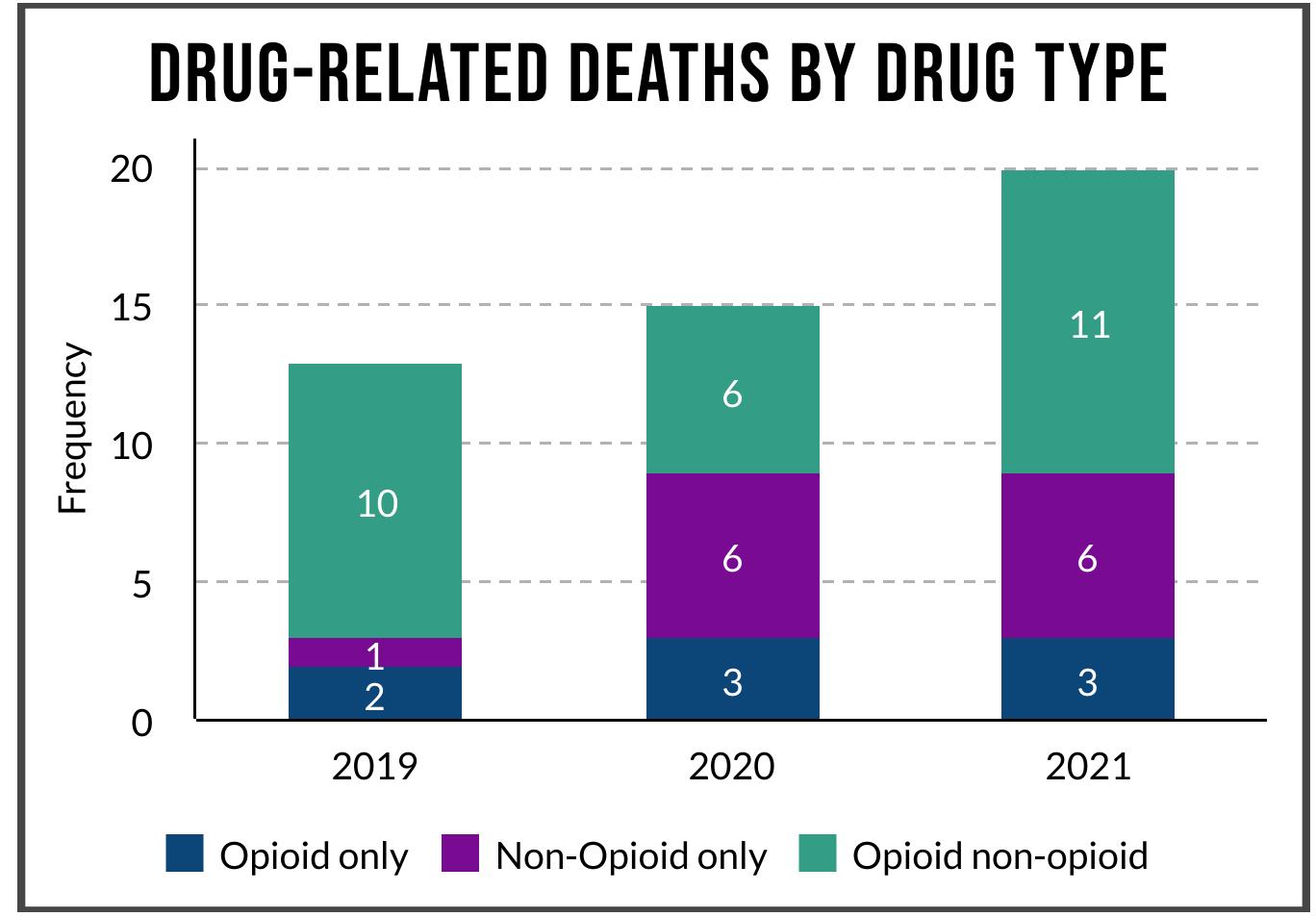
Van Buren County

All drug-related deaths

Age	Race	Sex	Death certificate: Substances contributing to death	Injury Zip code
59	W	M	methamphetamine	49064
63	W	F	alprazolam, hydromorphone, morphine, methamphetamine	49079
75	W	М	phentermine	49038

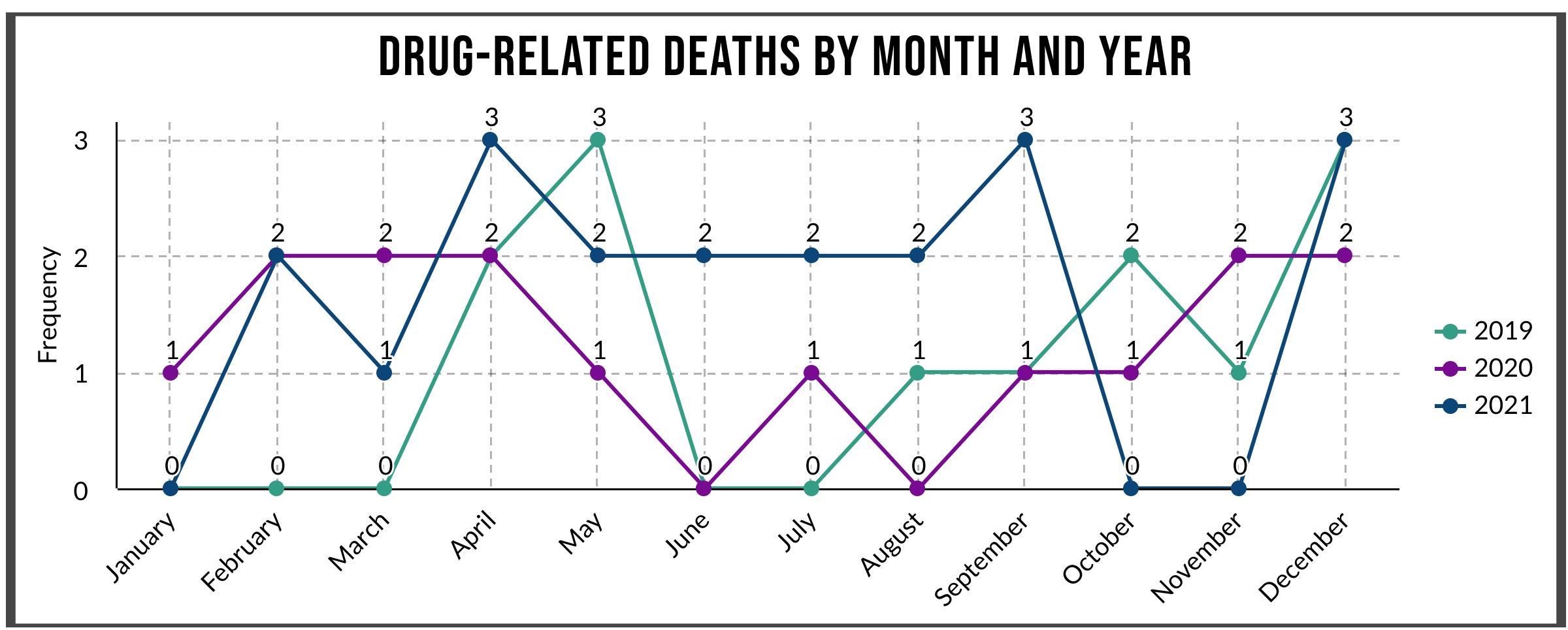
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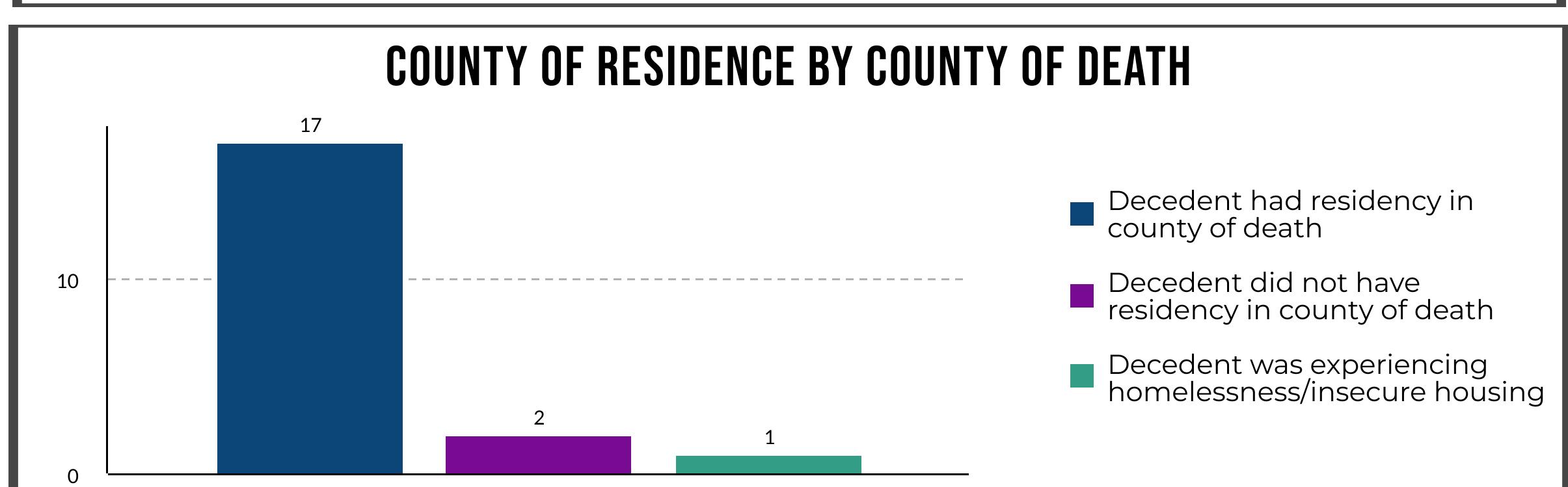
Total Drug-Related Deaths



Year	Total deaths	Deaths per 10,000	
2019	13	1.7	
2020	15	2.0	
2021	20	2.7	

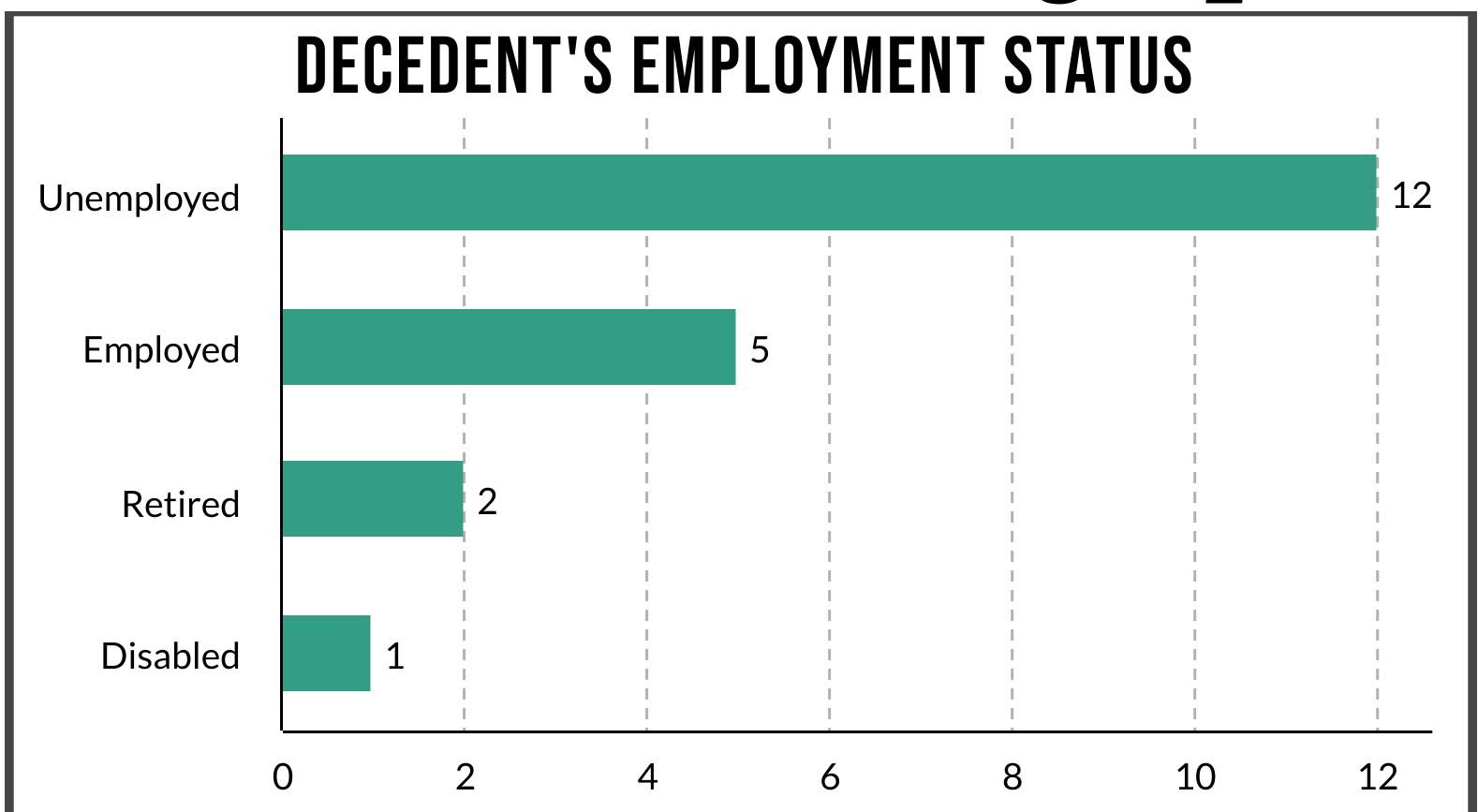


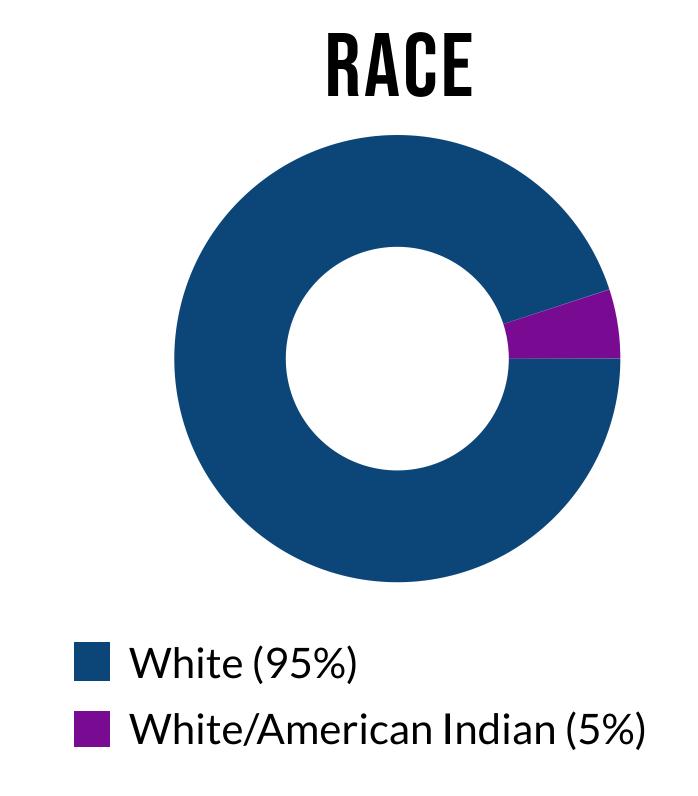




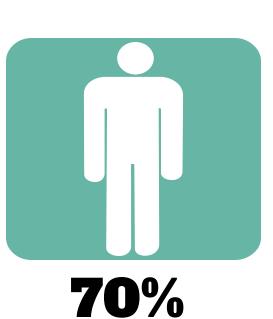
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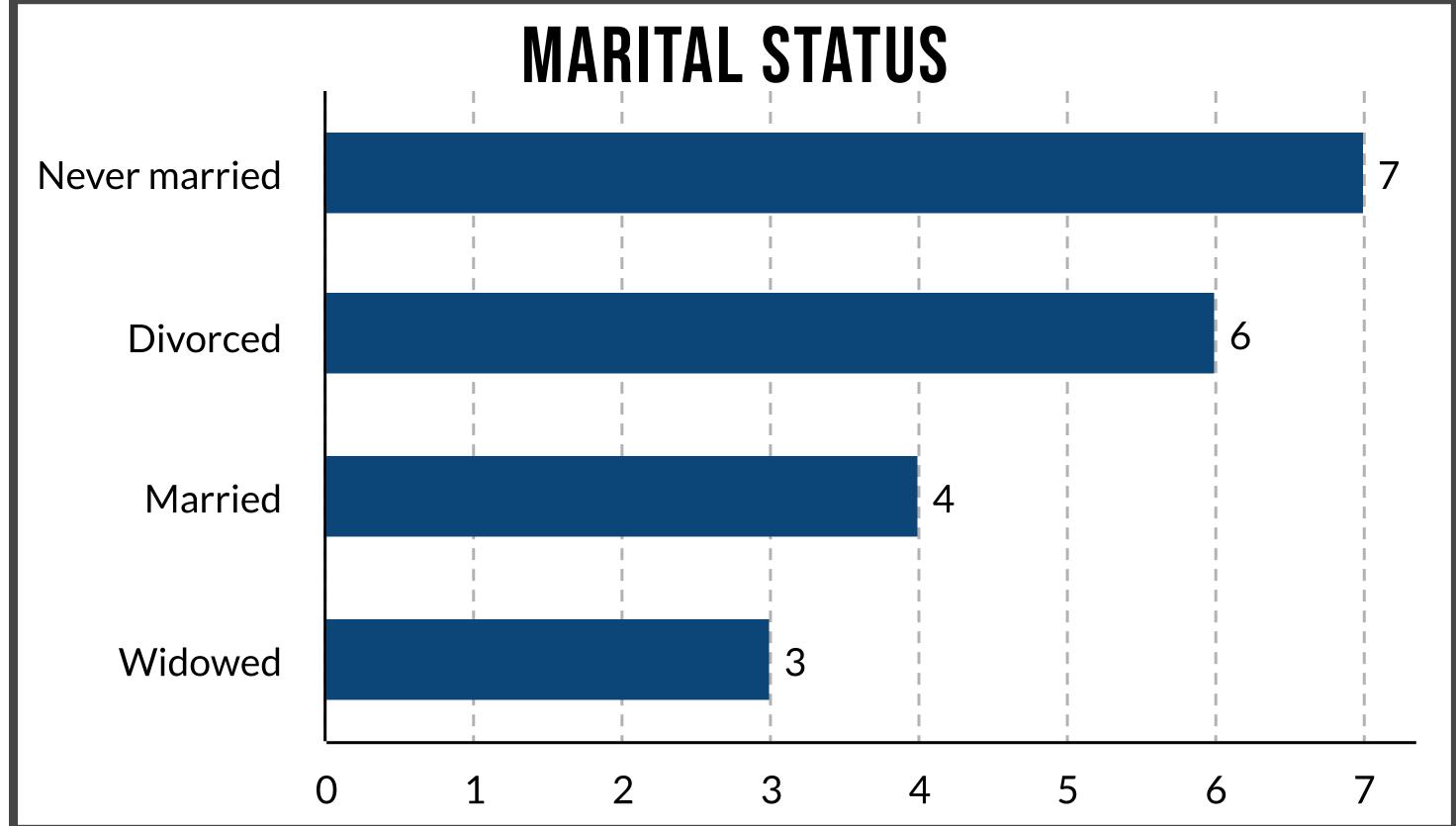
Demographics



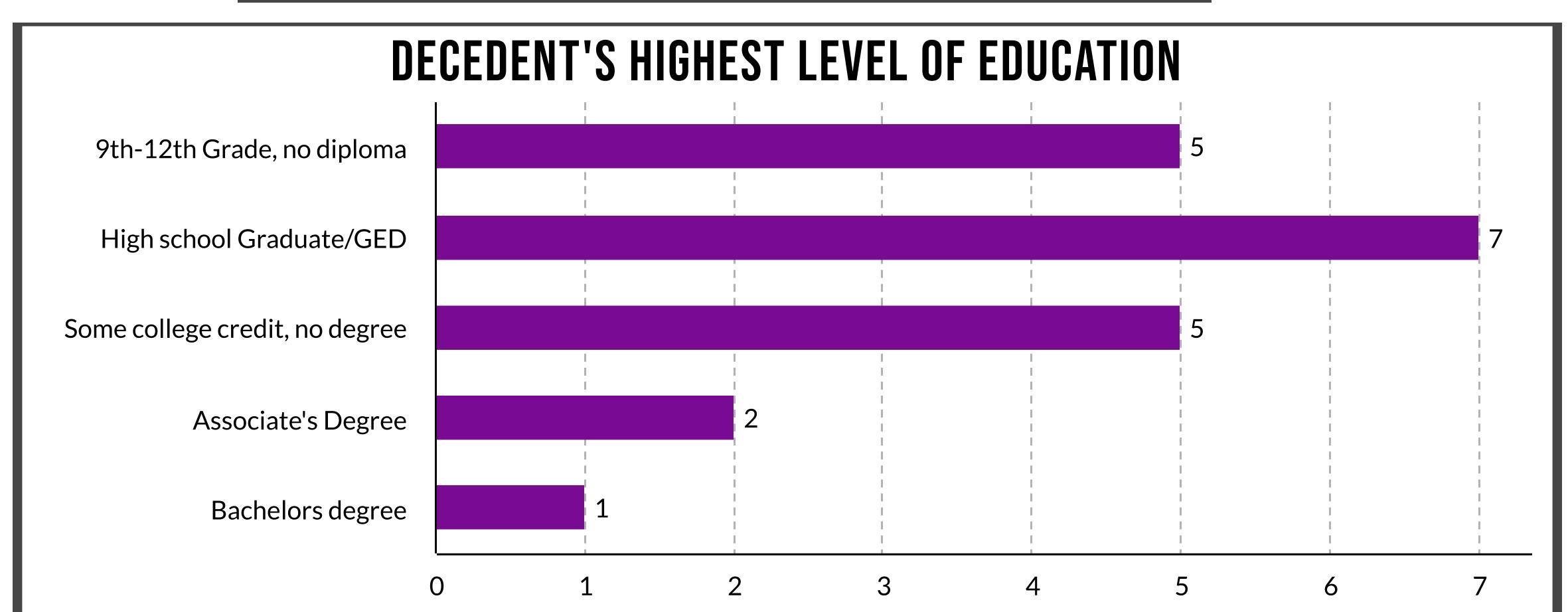






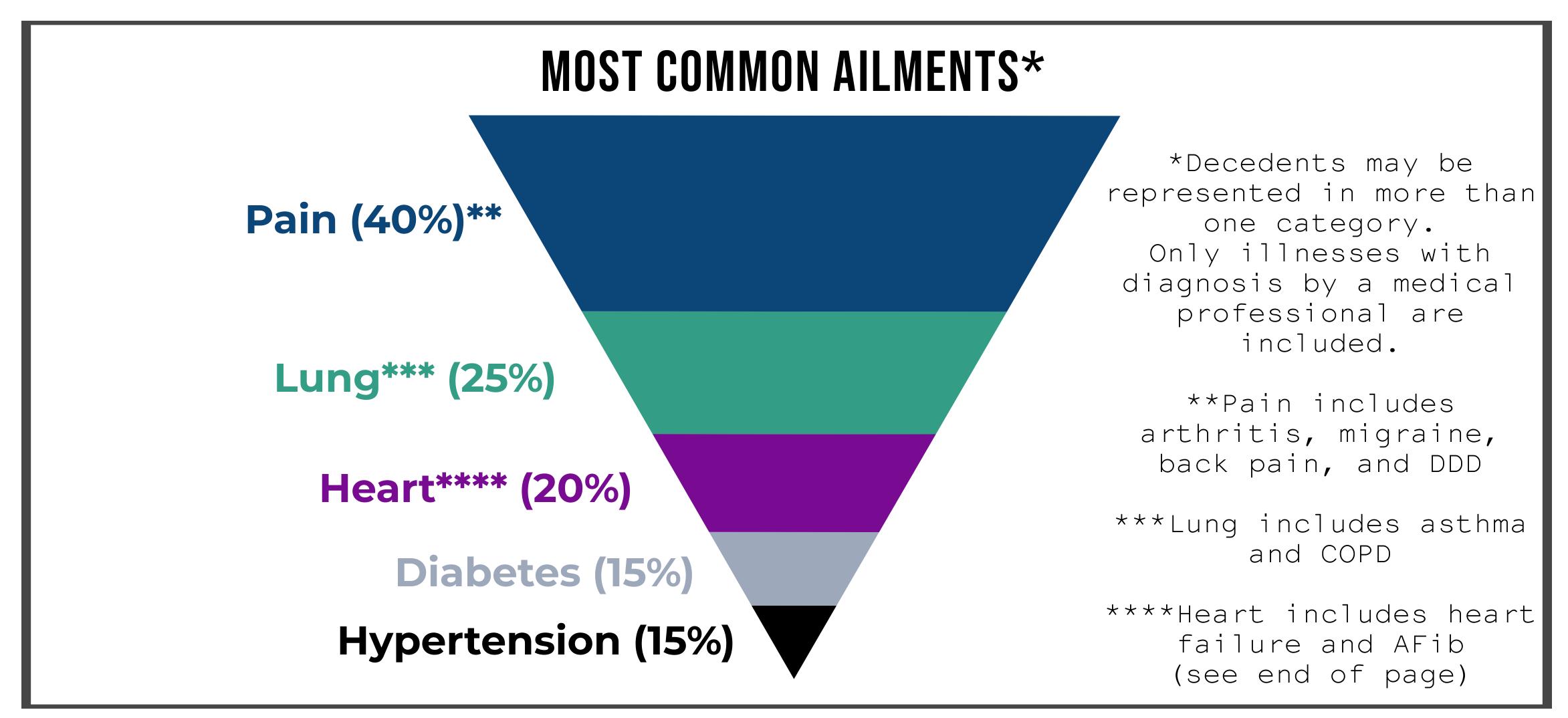


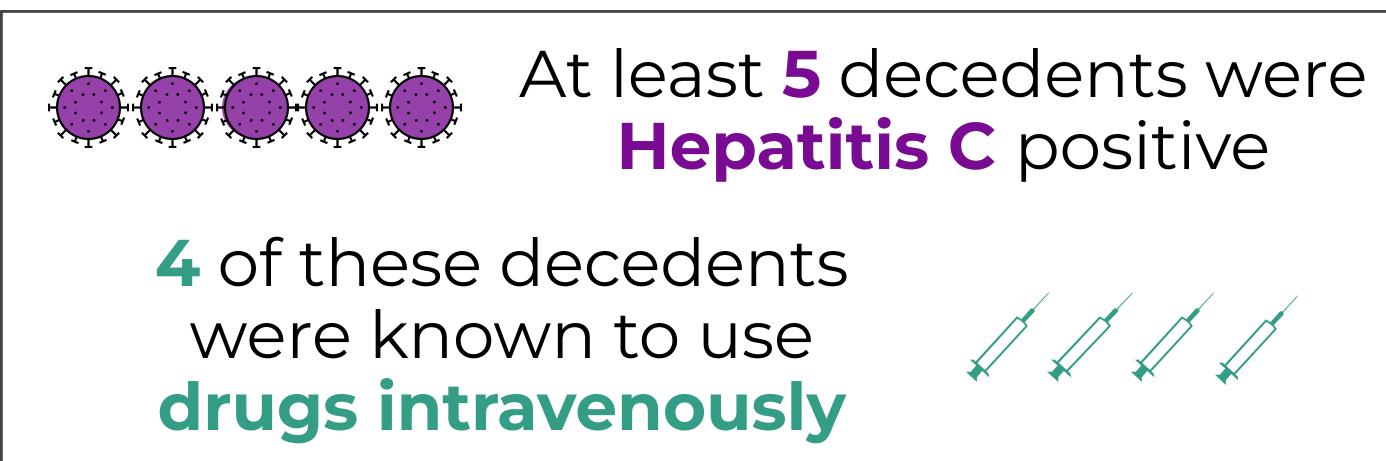




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Health Factors



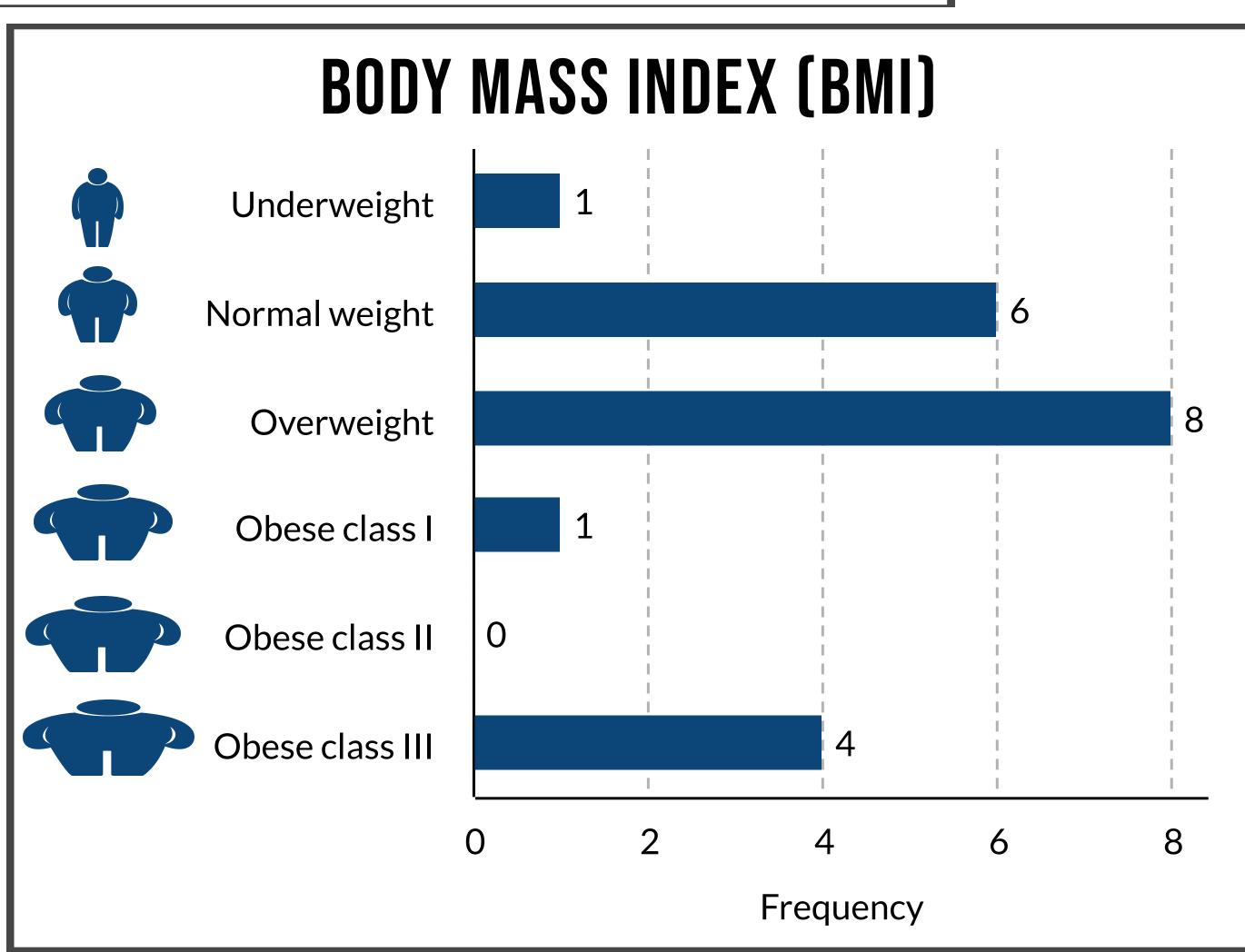


Decedent drank alcohol

*Moderate to heavy use

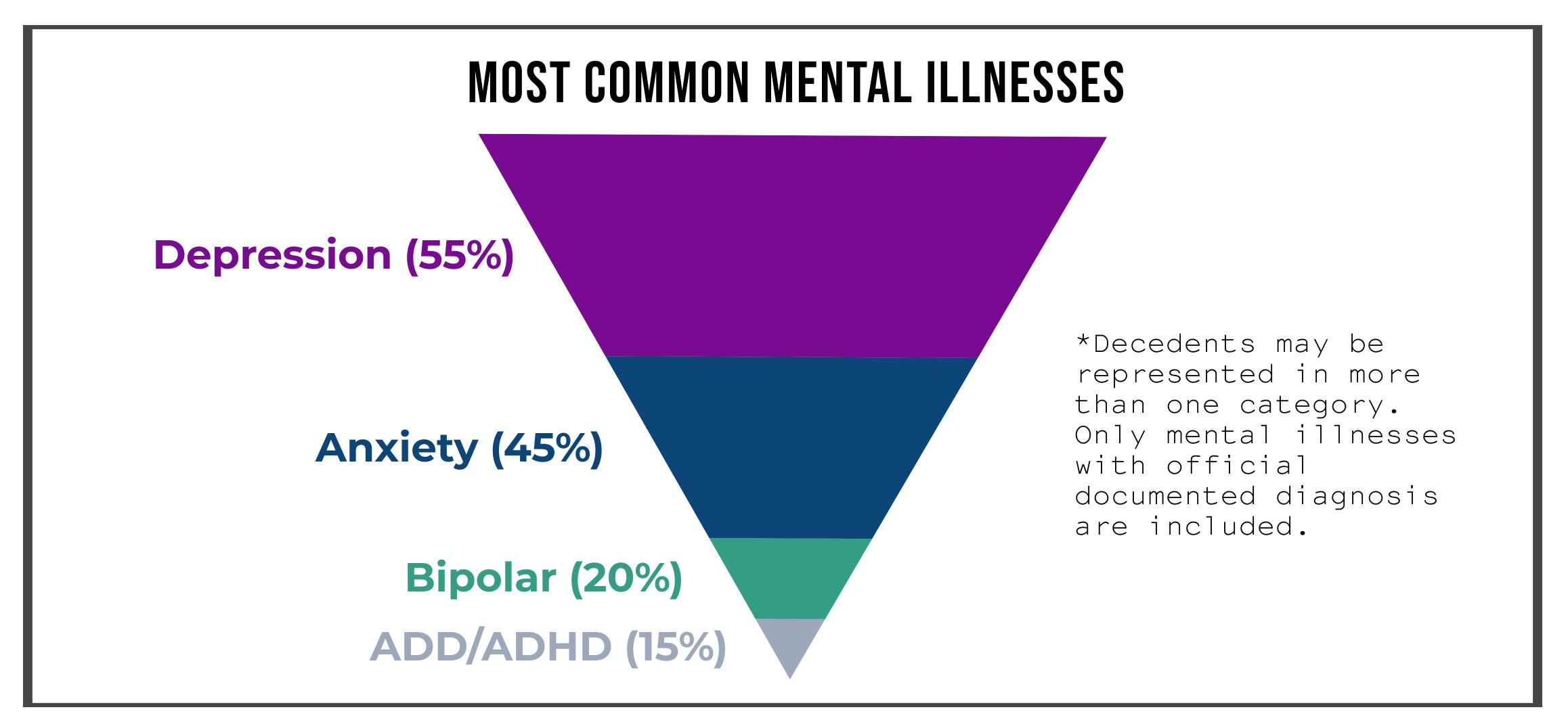
Decedent had a PCP*

*Primary care physician



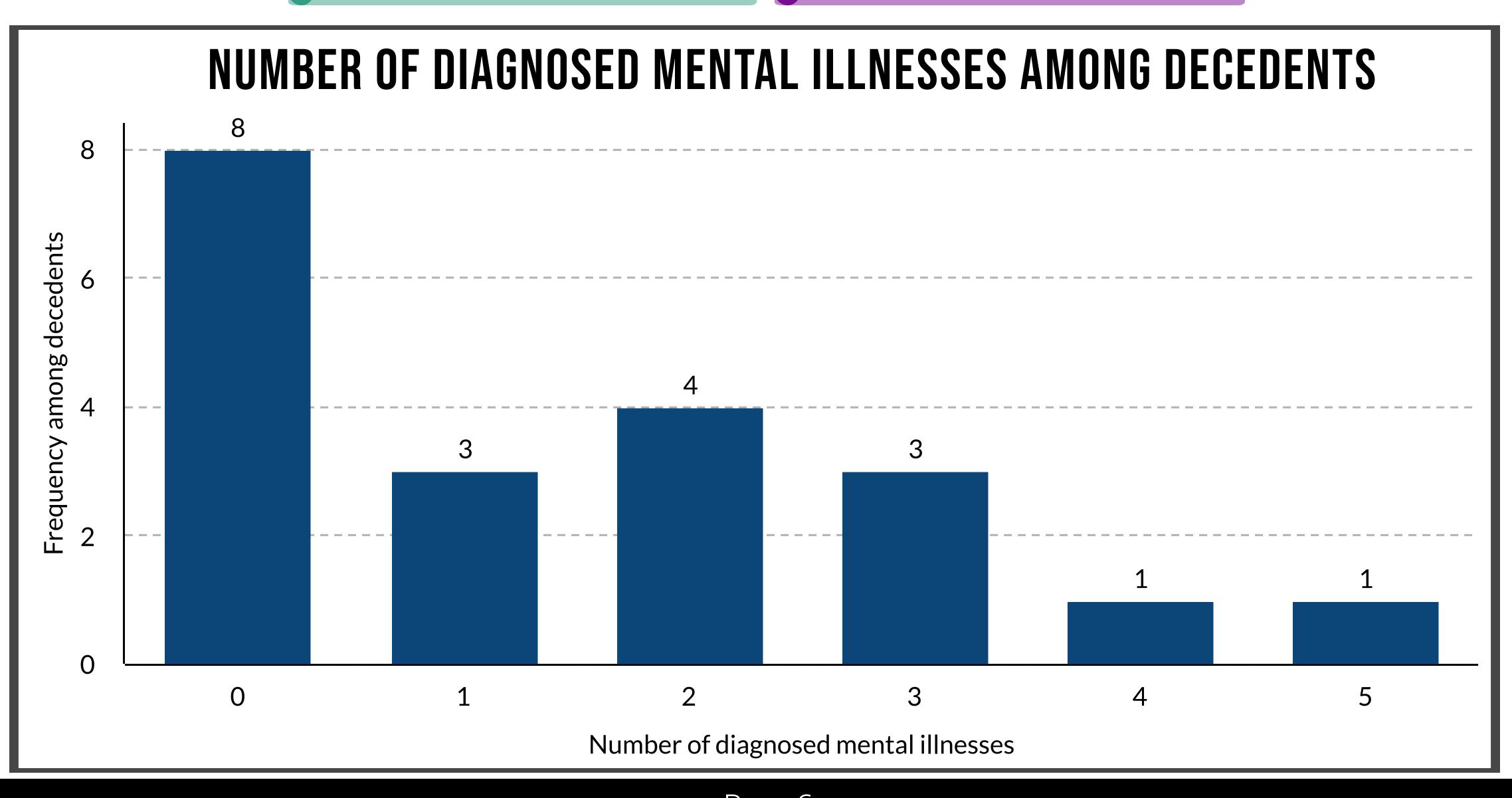
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Mental Health Factors



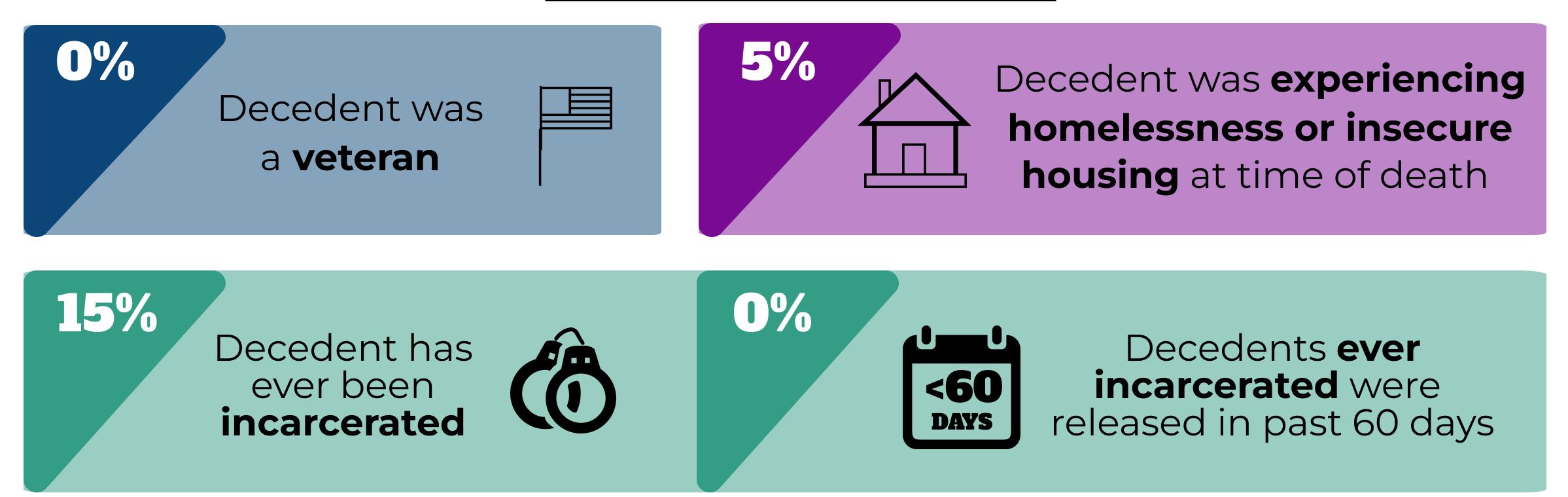
PERCENTAGE OF DECEDENTS



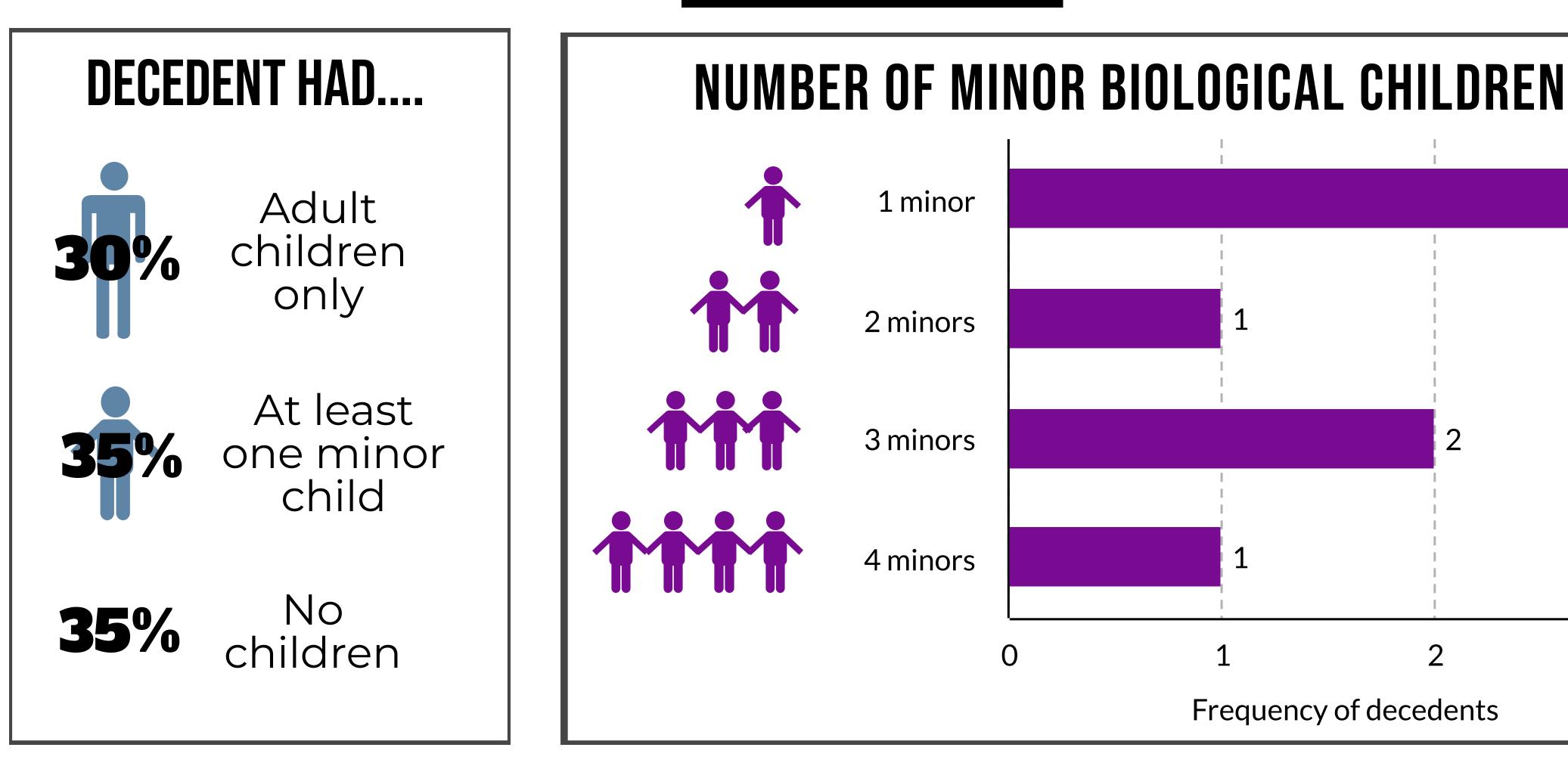


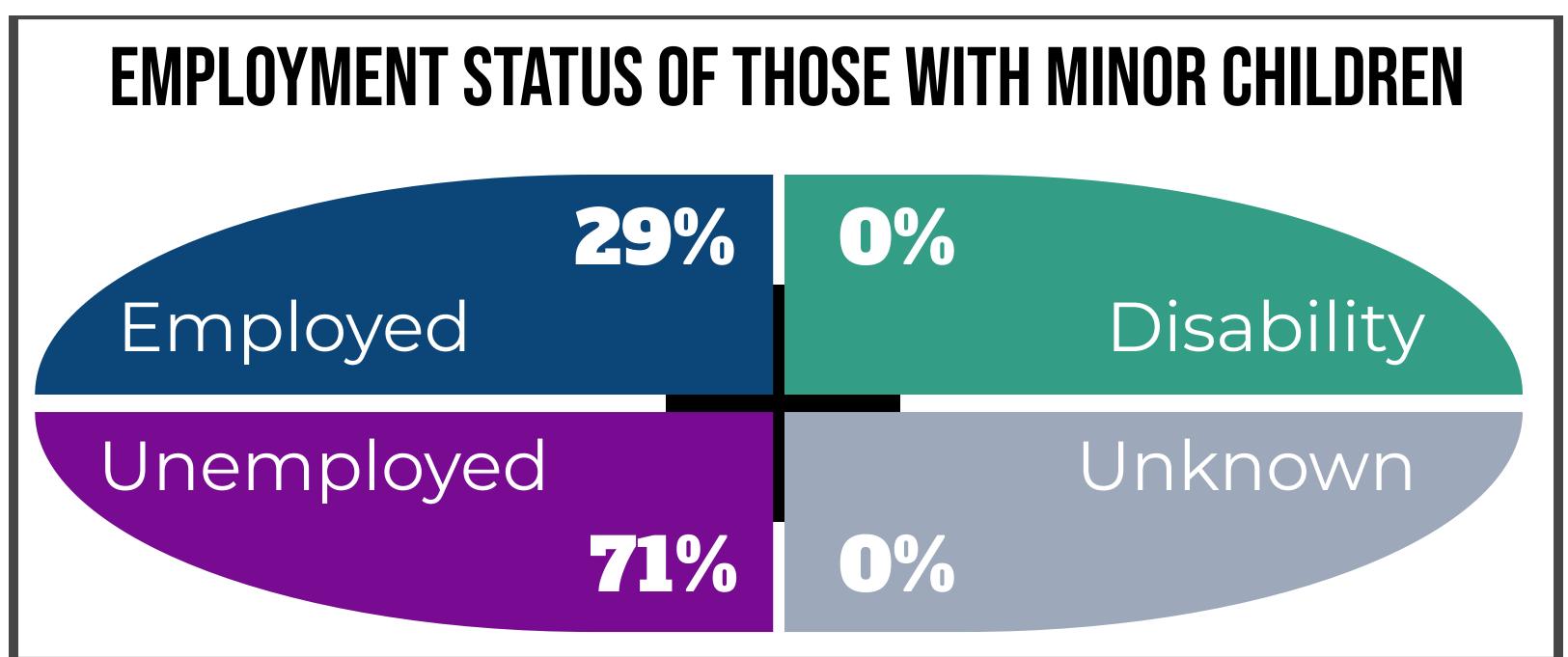
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Social Factors



Children

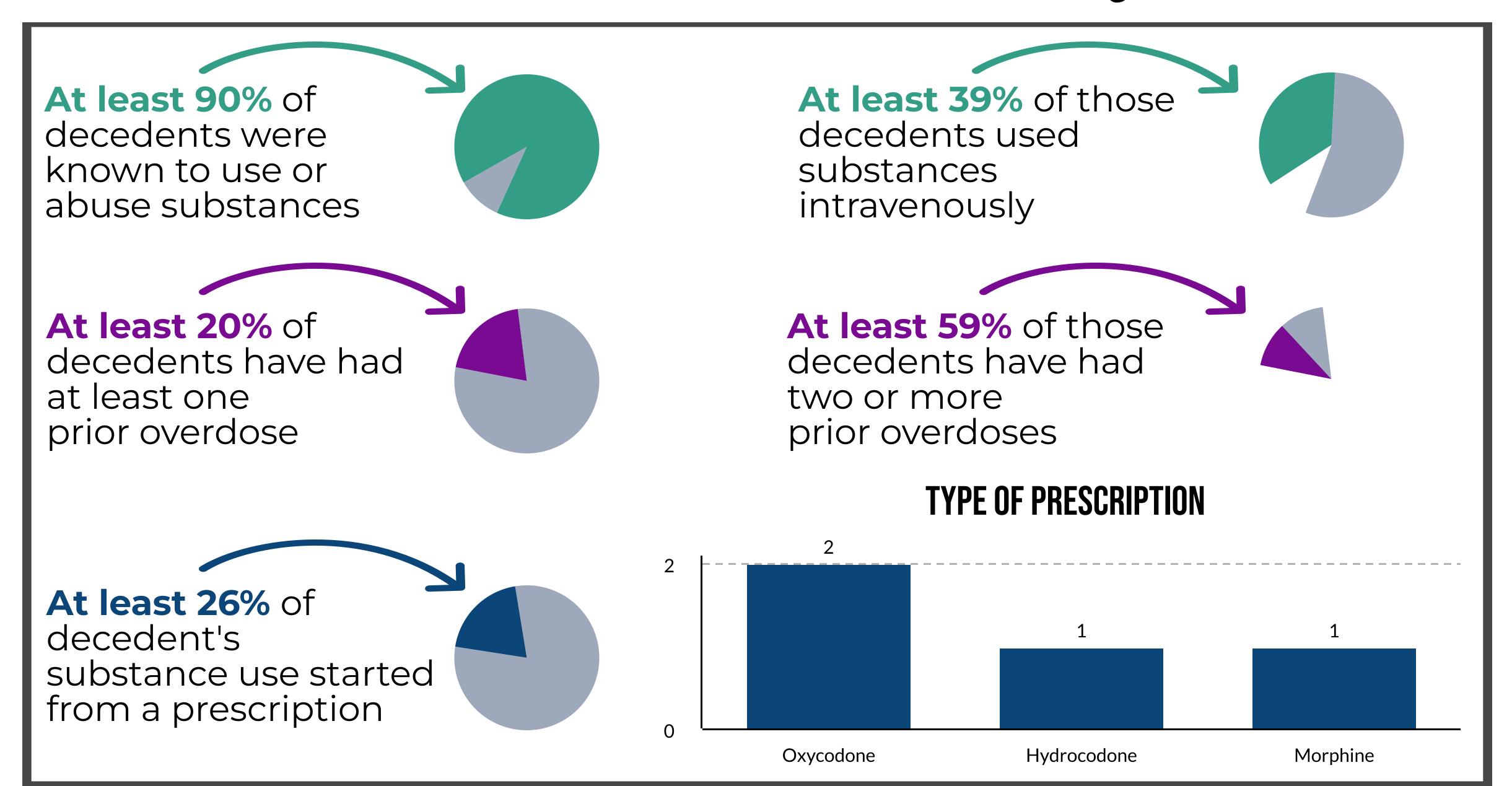


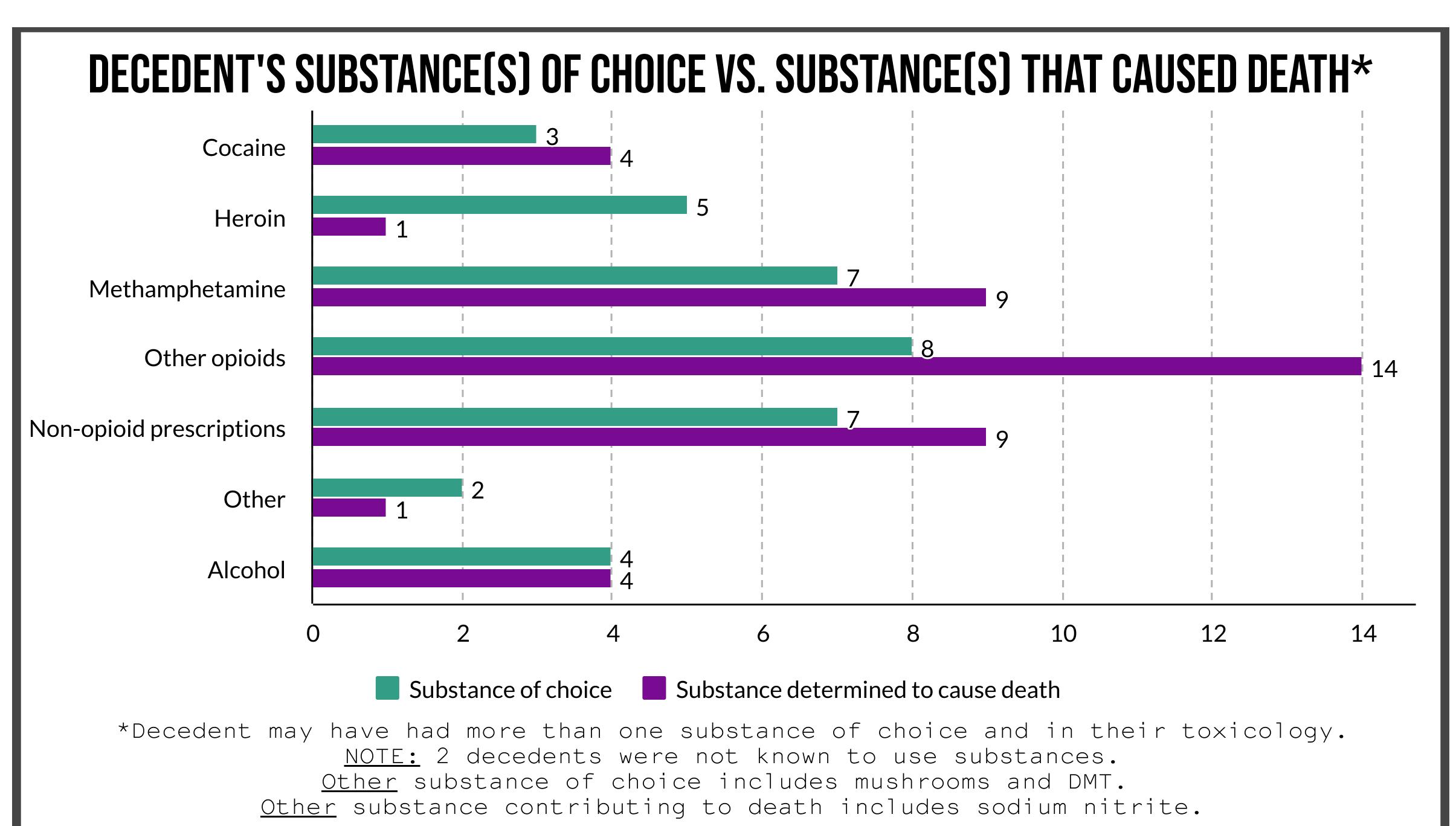


4 decedents lived with their minor child(ren) at time of death

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Substance Use History





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Substance Use History, cont.

PREFERRED METHOD OF ADMINISTRATION* (N=17)

Method	Male (n=11)	Female (n=6)	White (n=17	Total (n=17)**
Intravenous	6	O	6	6
Snort	5	O	5	5
Smoke	3	2	5	5
Transdermal	O	0	O	O
Huff	O	0	O	O
Oral	4	3	7	7
Unknown	O	2	2	2

^{*}Decedent may have had more than one preferred method of administration. Only includes decedents with a substance use history.

RECOVERY HISTORY (N=18)*

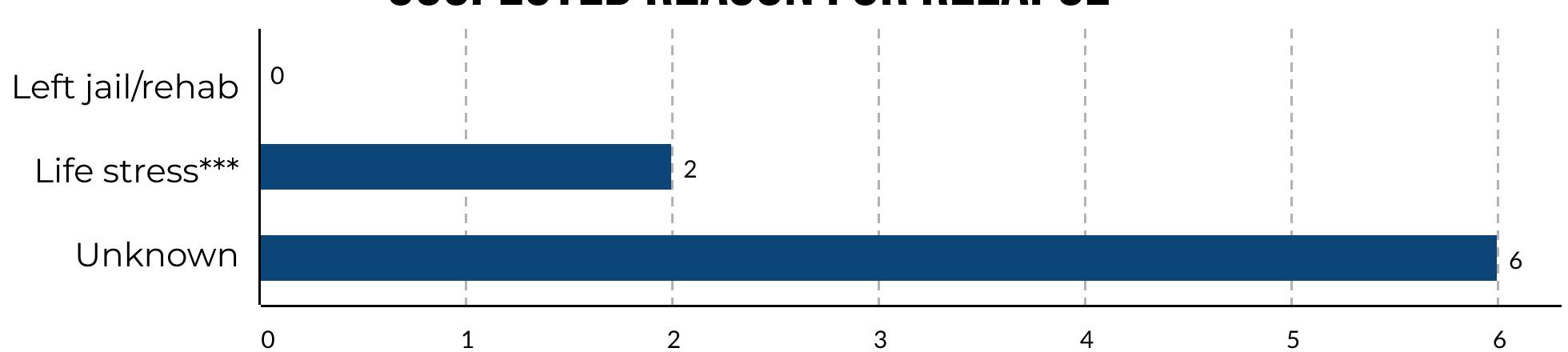
17%
Decedent has been to a treatment clinic or detox center at least one time

Decedent was recently reportedly substance free in the past three weeks

44%

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.

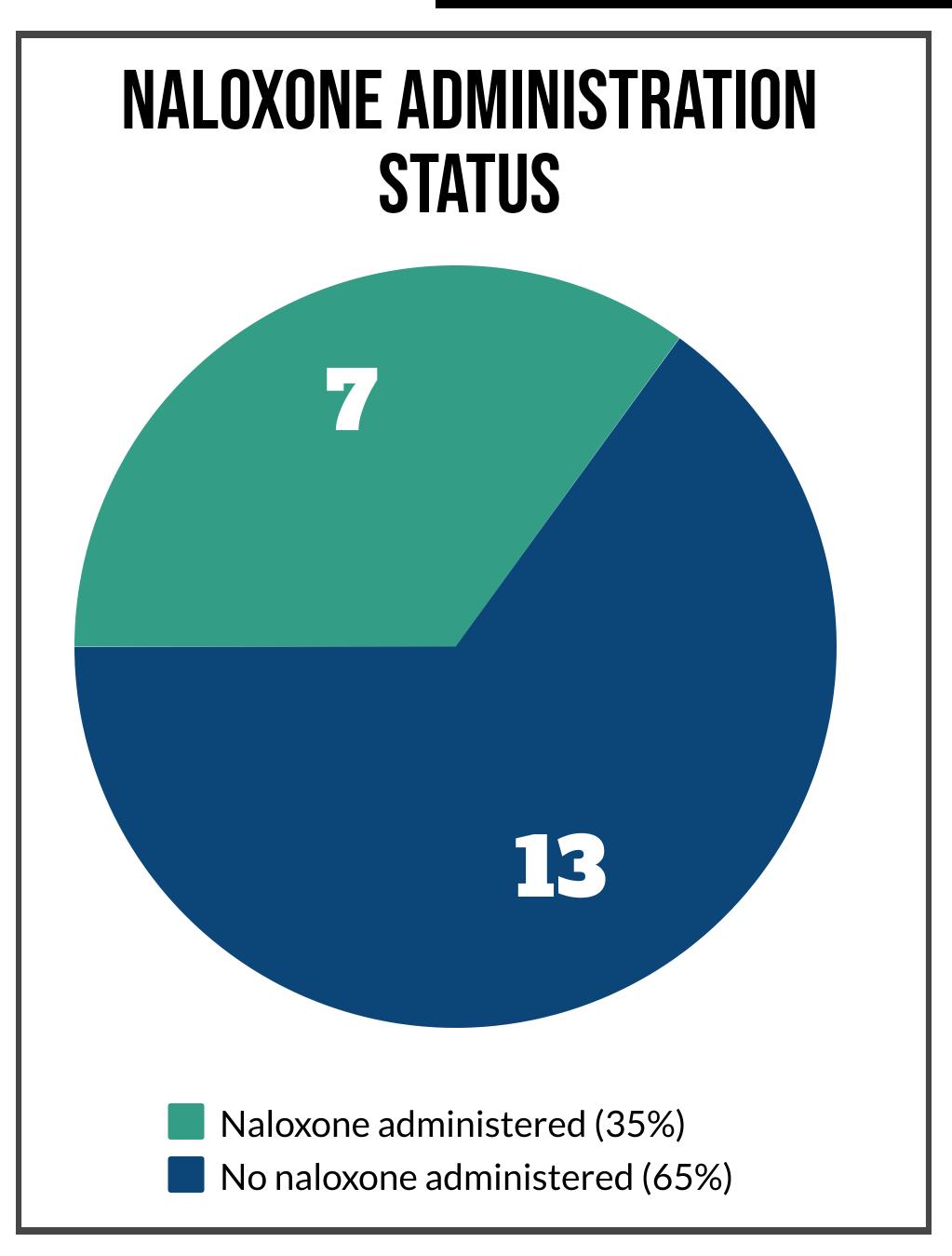
**These factors were mentioned by those close to the decedent for why they may have begun to use substances again after being substances free for at least three weeks.

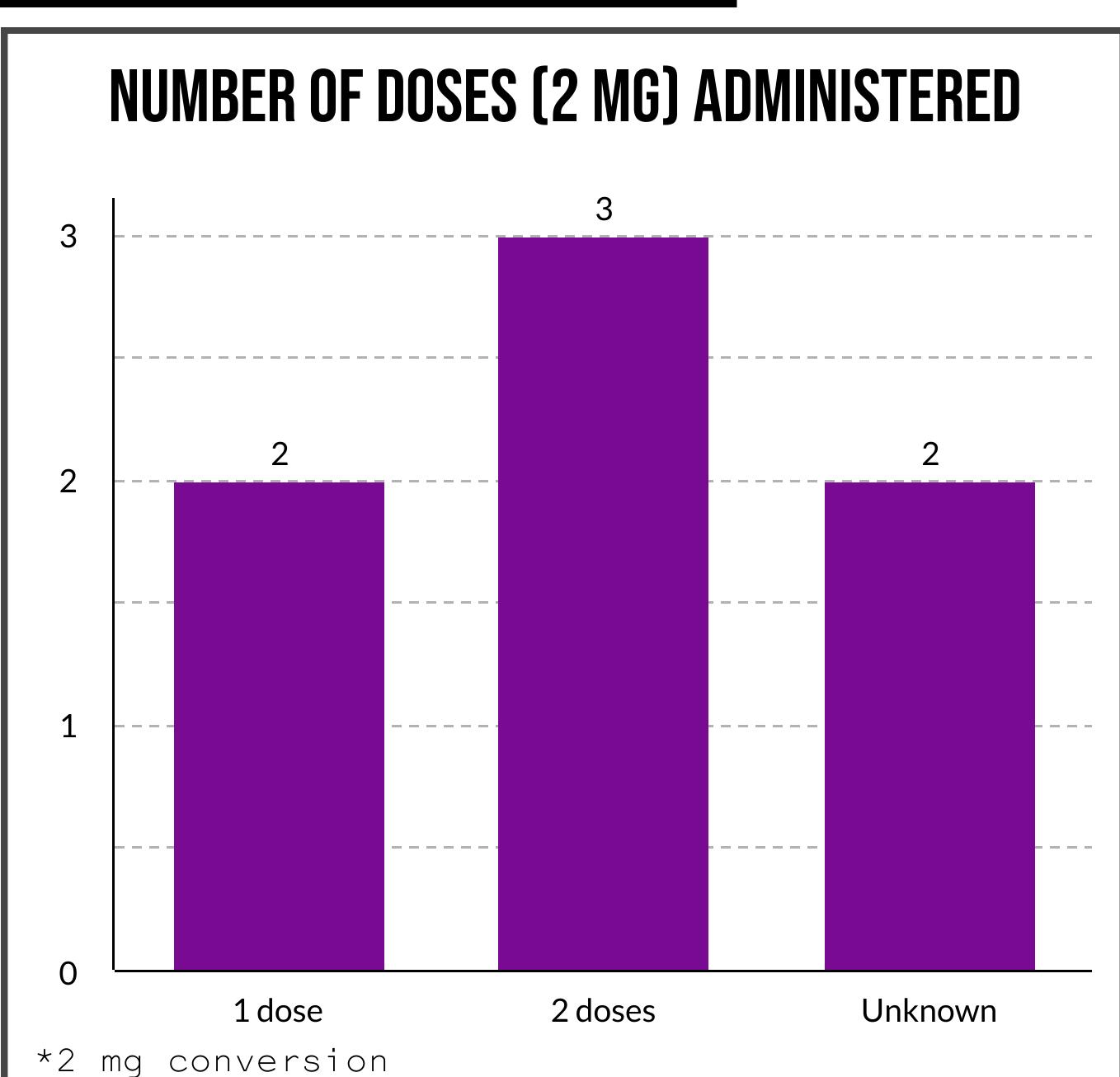
***Life stress includes social circle influences.

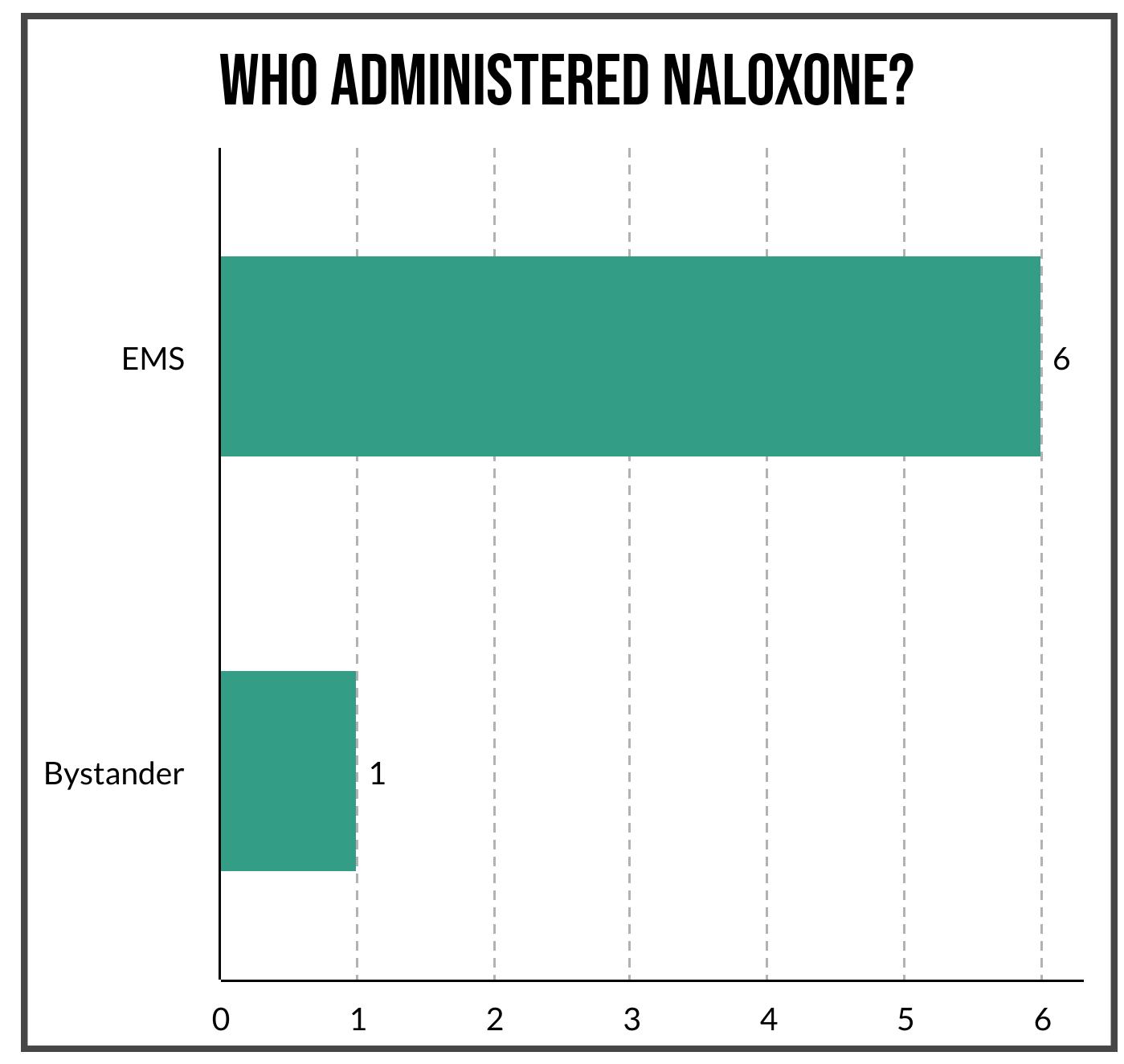
^{**}Decedent of white/American Indian descent is excluded (n=1).

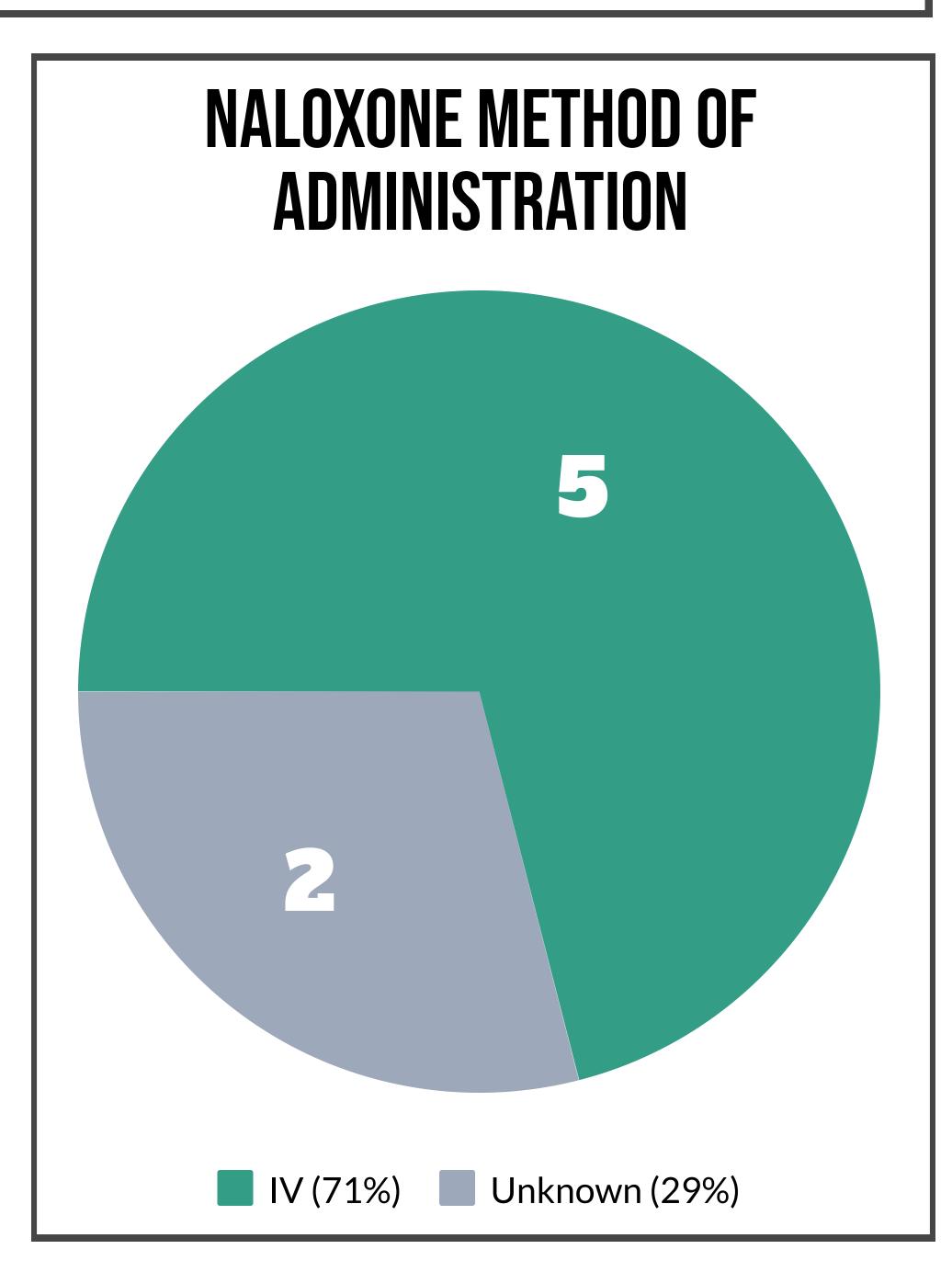
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Naloxone Administration



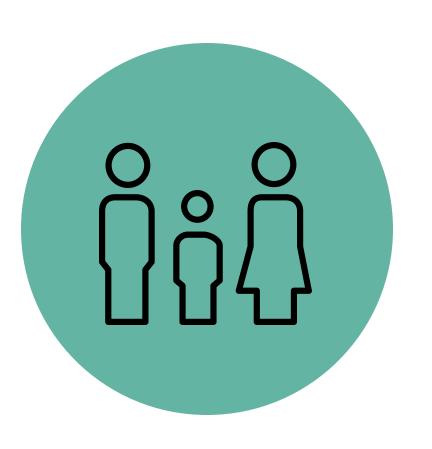






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Death Scene Findings



65%
Were found by family



O%
Were found
by a minor



5%
Were found on welfare check



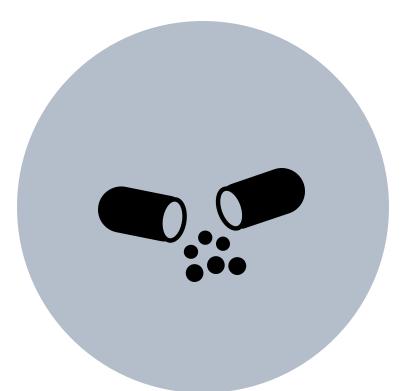
85%
Died at their residence



O%
Died at the hospital



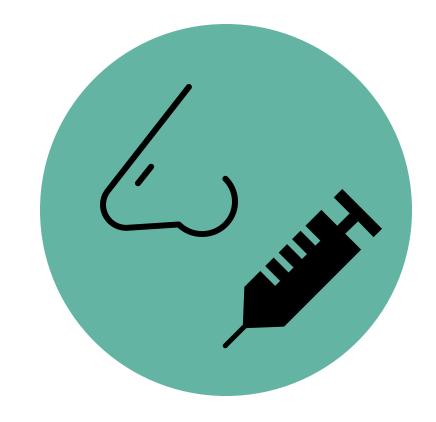
15%
Died at another residence



45%
Medication was found on scene



35%
Syringes were found on scene



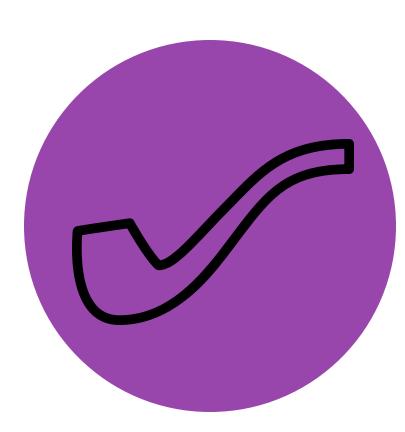
10%
Had Narcan on scene



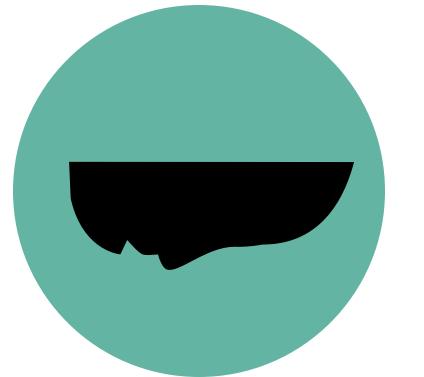
95% Suspected overdose before autopsy



45%
Suspected illicit substance(s) were found on scene



20%
Pipes were found on scene



35%
Decedent was found face down



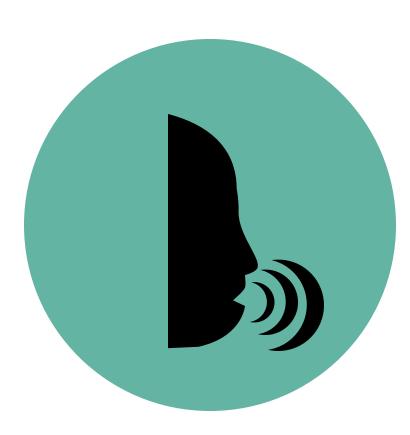
55%
Were dead
upon EMS
arrival



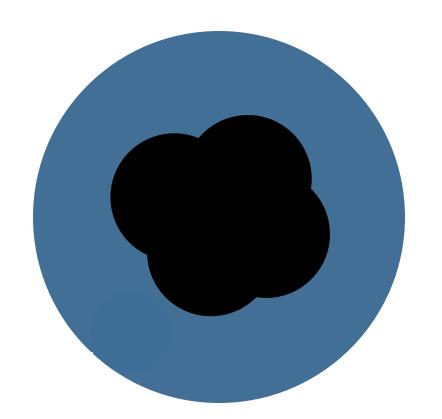
85%
Used the fatal substance(s)
alone



15%
Decedent was snoring



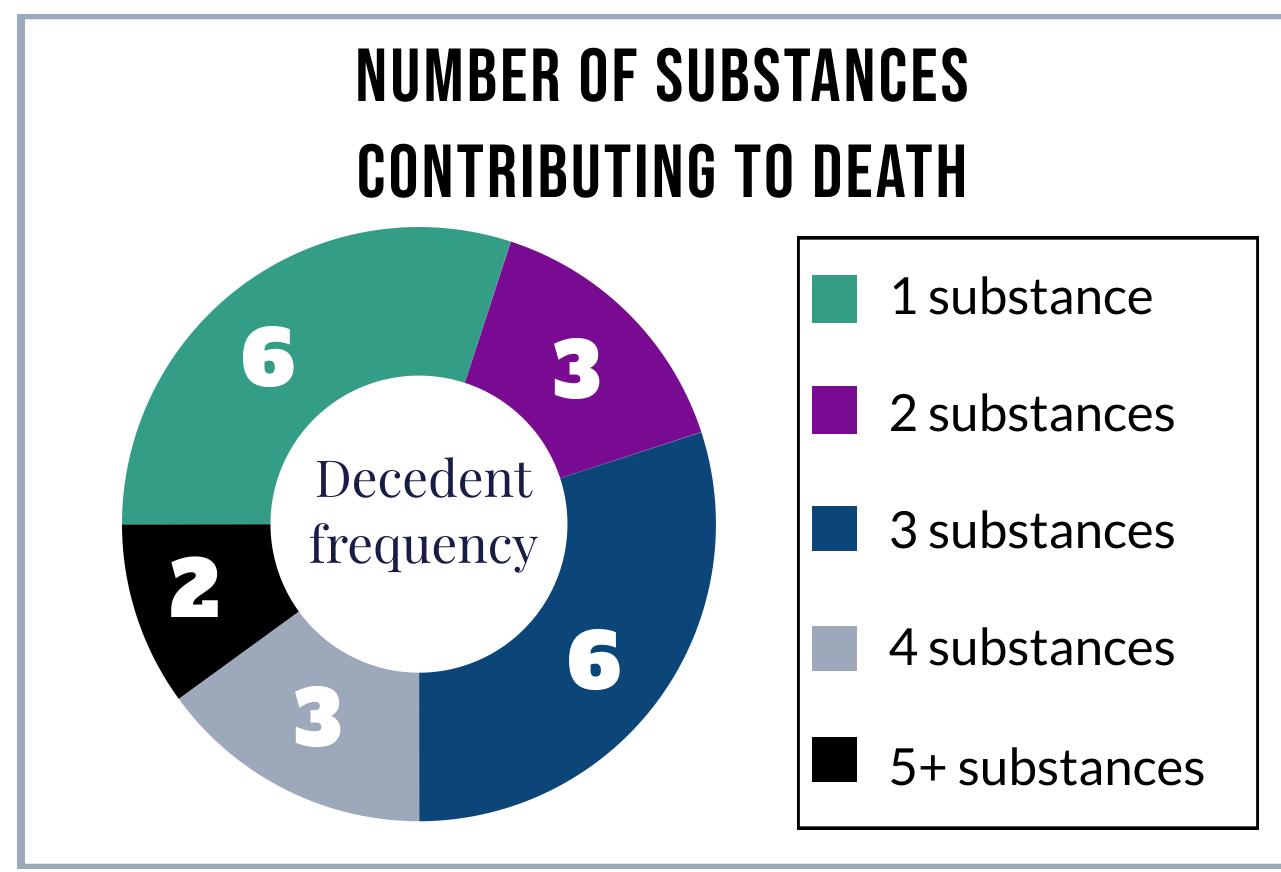
0%
Decedent was
making
gurgling sounds

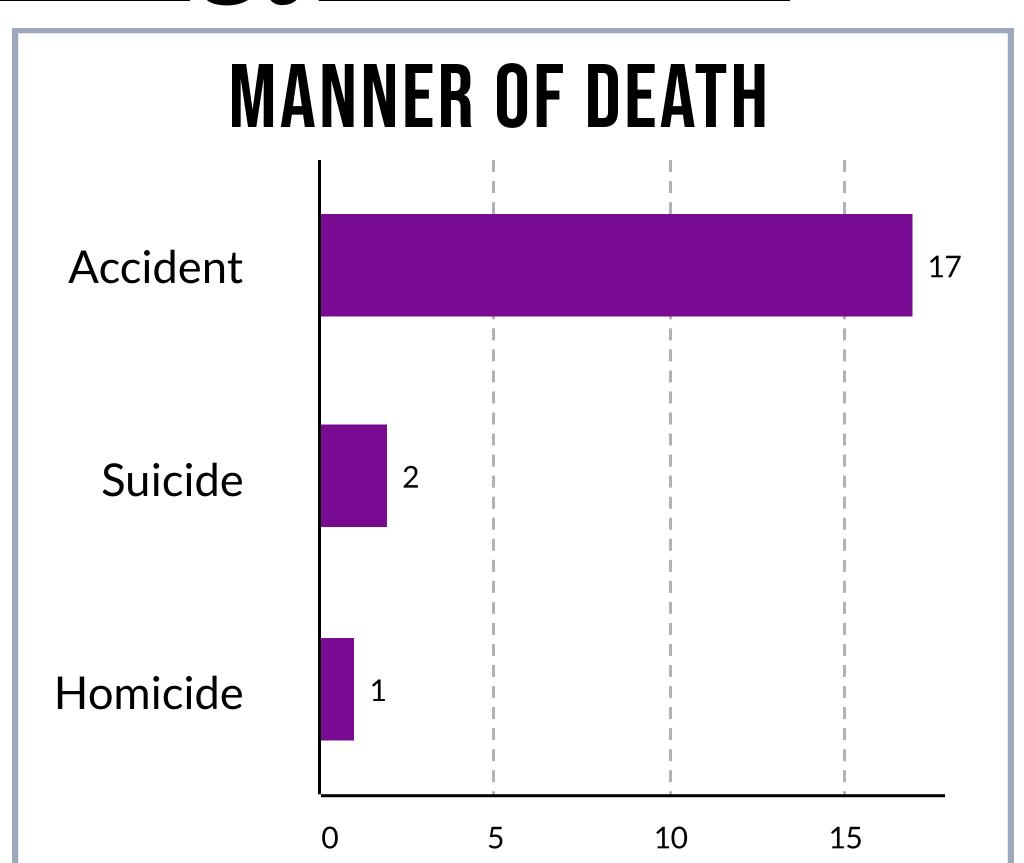


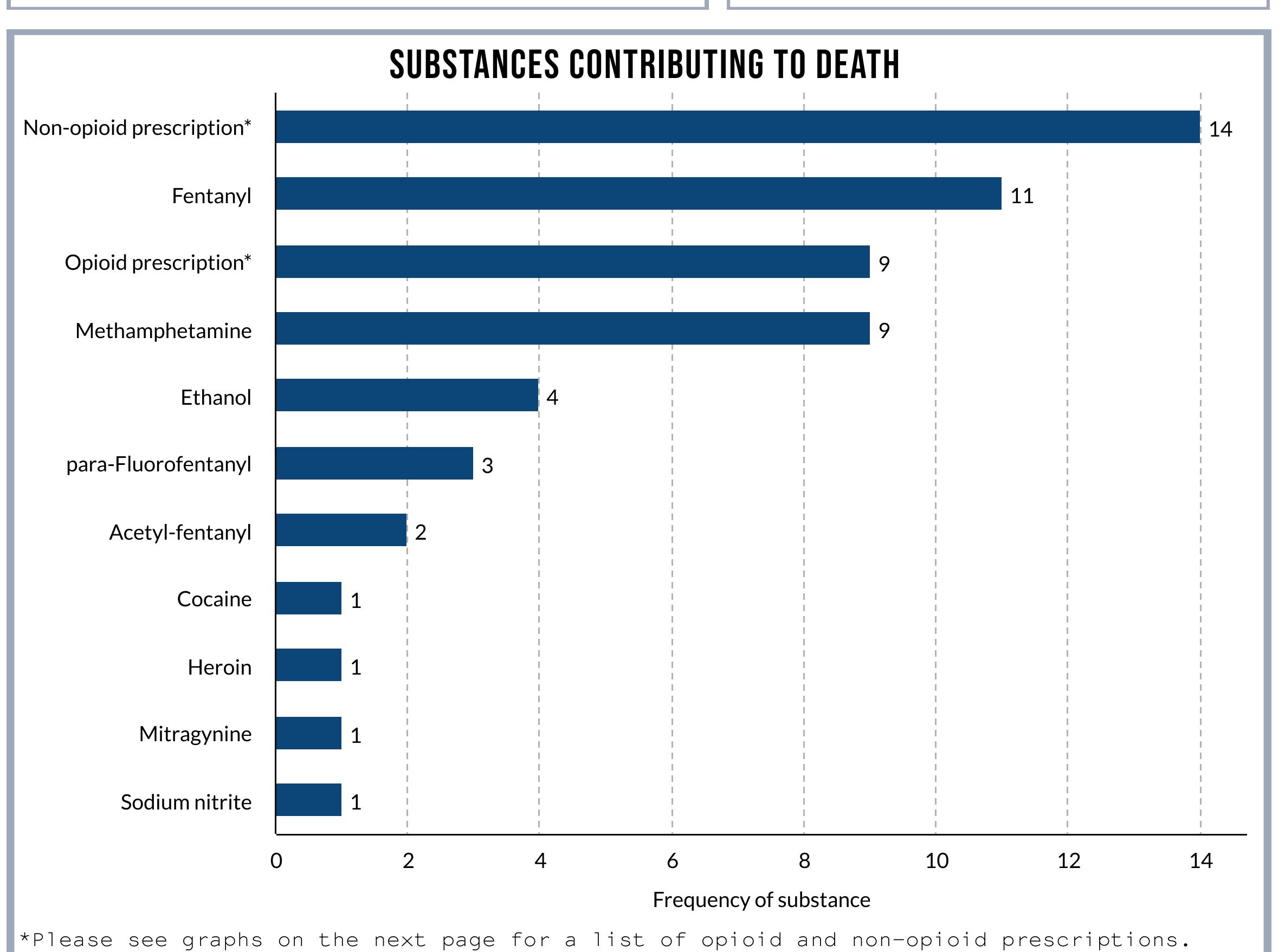
5%
Decedent had
foam cone

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Autopsy and Toxicology Results

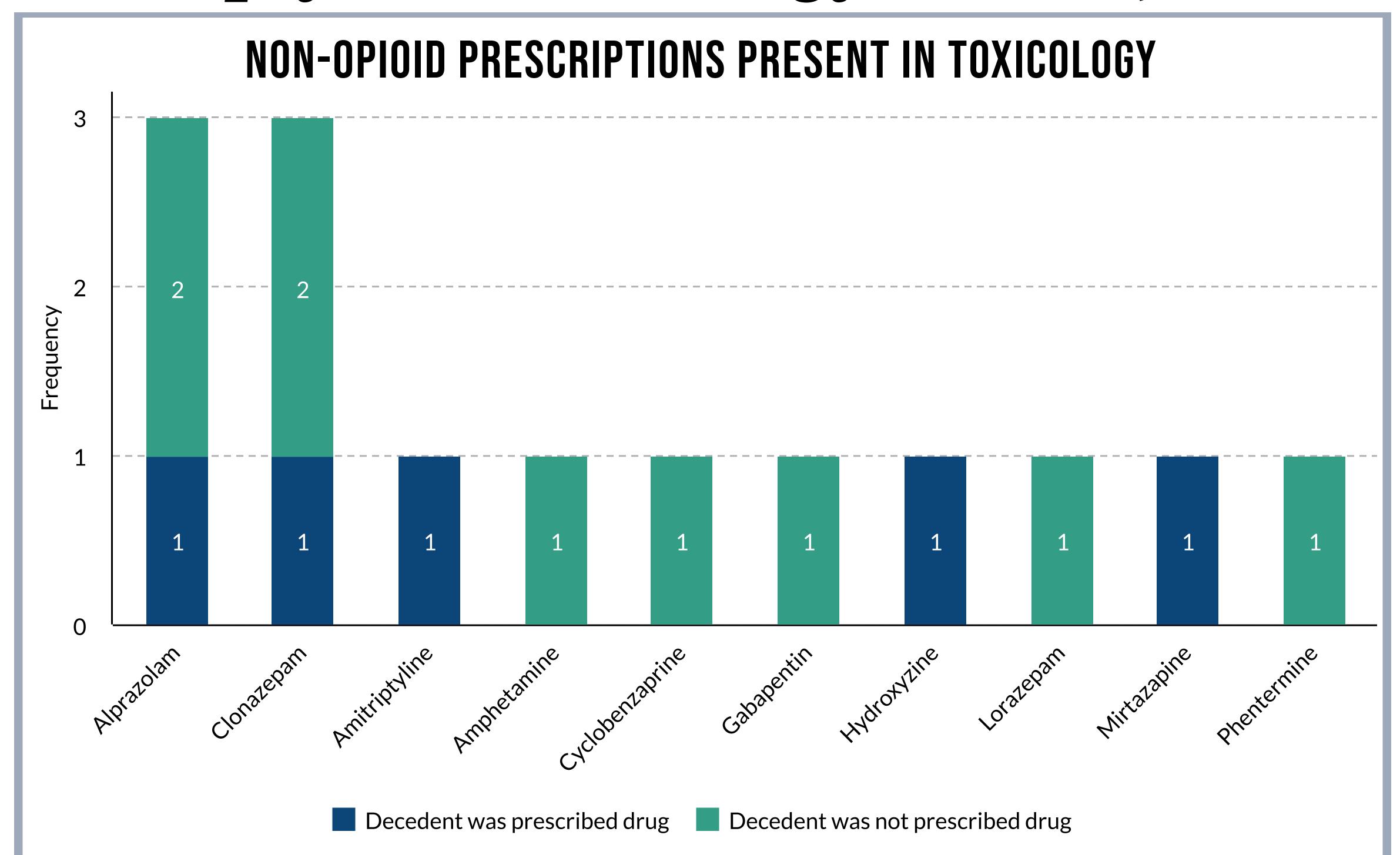


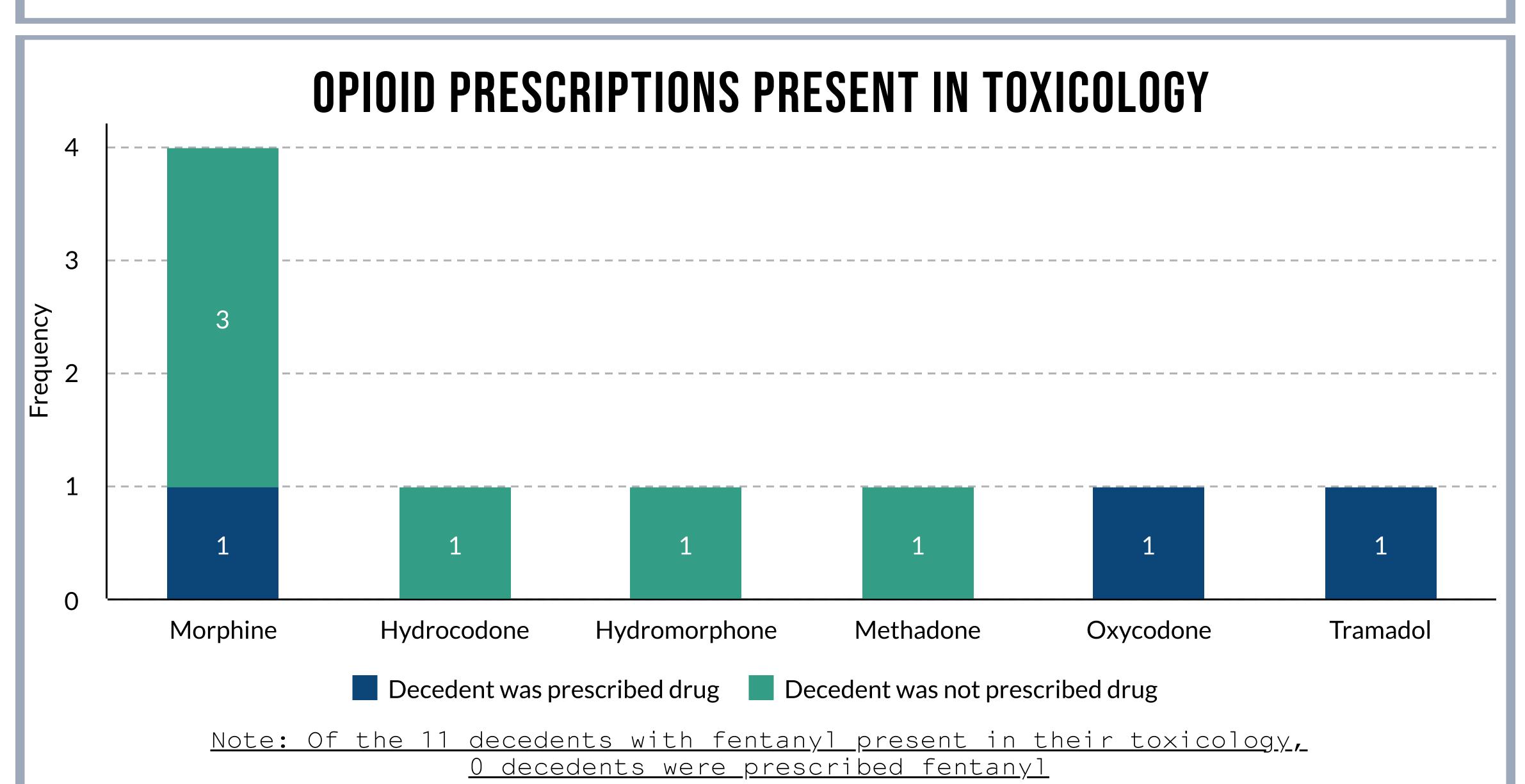




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Autopsy and Toxicology Results, cont.





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Highlights OPIOIDS AND POSITIONAL ASPHYXIA

57% (8 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

20% (1 of 5) 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

Sodium Nitrite 1 death

- Inorganic compound used to cure meats to prevent spoilage
 Over-ingestion causes hypotension and limits oxygen circulation resulting in cyanosis, hypoxia, altered consciousness, dysrhythmias, and death

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

Acetylfentanyl 2 deaths

- Analogue of fentanyl that causes similar effects to fentanyl
 Stronger than morphine but weaker than fentanyl
- No approved medical use in the United States

SUBSTANCE COMBINATIONS

HEROIN & FENTANYL

1 decedent had heroin in their toxicology

This decedent also had fentanyl in their toxicology

BENZODIAZEPINES & OPIOIDS

5 decedents had a benzodiazepine and an opioid in their toxicology

2 decedents were prescribed the opioid and benzodiazepine

XYLAZINE & FENTANYL

o decedents had xylazine in their toxicology

METHAMPHETAMINE & OPIOIDS

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

3 decedents had methamphetamine and fentanyl in their toxicology