**Deaths on Martha’s Vineyard**

**Resulting from Substance Abuse/Misuse - 2010-2016**

**Notes & Definitions**

 Using data from death certificates made available by the Medical Examiner, this document provides information about deaths resulting from substances on Martha’s Vineyard over the period 2010-2016. “Substances” are defined as either alcohol or drugs. The term “drugs” includes all substances other than alcohol - legal, illegal, prescribed, or obtained without prescription.

Deaths from substance *abuse*and substance *misuse*are both included. Substance abuse is behavior associated with the chronic disease now defined as Substance Use Disorder (SUD) in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, and classified by the DSM-5 as *mild*, *moderate* or *severe*. Substance misuse does not necessarily imply a chronic disorder and may not rise to the level of disease. Substance misuse might include persons who use someone else’s prescription; who use their own prescriptions in different dosages or for different purposes than prescribed; who engage in binge drinking; who engage in underage drinking; or who use illegal substances.

**Numbers**

There were 52 substance abuse/misuse deaths from 2010 to 2016 on MV.  There was a clear increase in total deaths starting in 2013, though this may be attributed to the unusually high number of alcohol deaths in that year. Seven people died from alcohol that year whereas Martha’s Vineyard usually sees an average of 3 or 4 alcohol deaths annually.

In 2014, there was a sharp increase in opioid deaths, a trend that continued in subsequent years.

Substance abuse/misuse-related deaths as a proportion of all deaths appear to be rising. Between 2010 and 2013 they comprised between 2-4% of total deaths on Martha’s Vineyard, but in 2015 they made up 8% of total deaths.

**Alcohol vs. Drugs**

Prior to 2014, alcohol was the cause of 65% of substance abuse/misuse-related deaths; after 2014 it was cited in only 34% of the total deaths.

Opioids are implicated in the vast majority of the 25 drug-related deaths. It is conceivable that the role of opioids is even greater since 6 of these 25 deaths did not identify any specific classes of drugs, instead citing "chronic SA (substance abuse)" as a condition contributing to death.

Only 3 deaths attributed to drugs did not involve an opioid as part of the mix.

Four of the 25 drug-related deaths involved “medication assisted treatment” substances (buprenorphine and methadone); 6 involved fentanyl; 4 did not specify the type of opioid involved; and 3 included alcohol (though only one of these three was cited as an opioid/alcohol combination).

**Age Distribution**

The average age of substance abuse/misuse death is 50; the median age of death is 49.

As expected, drug deaths tend to cluster in the 30-year-old age group, while alcohol deaths mostly occur within the late 50s/early 60s bracket. The average age of alcohol deaths is 56, the median 57; the average drug-death is at 43, with a median age of 37.

**Gender makeup**

Males make up 69% (32) of the 52 substance misuse deaths. Fifty-eight percent (58%) of male deaths were due to alcohol, 36% to drugs.  Males died at an average age of 47 years old.

Sixteen of the 52 deaths were females, comprising 31% of total deaths. Thirty-eight percent (38%) of female deaths were due to alcohol.  The majority of female substance abuse/misuse-related deaths (56%) during this period were due to drugs. Females died at an average age of 55 years old.

**Martha’s Vineyard and Massachusetts: Preliminary comparisons on opioid deaths**

The latest Mass Data Brief on Opioid-related Overdose Deaths among Massachusetts Residents (DPH, February 2017) shows an increase in the rate of Unintentional/Undetermined Opioid-Related Deaths per 100,000 residents from 20.4 in 2014 to 25.8 in 2015.

By comparison, on Martha’s Vineyard Opioid-Related Deaths in those years are 29.4 per 100,000 in 2014, and 35.3 in 2015 using a gross population estimate of 17,000 for Martha’s Vineyard (Note: one of the 2014 deaths and one in 2015 listed “chronic SA” as a “condition contributing to death,” not the “primary cause” or “underlying condition”).