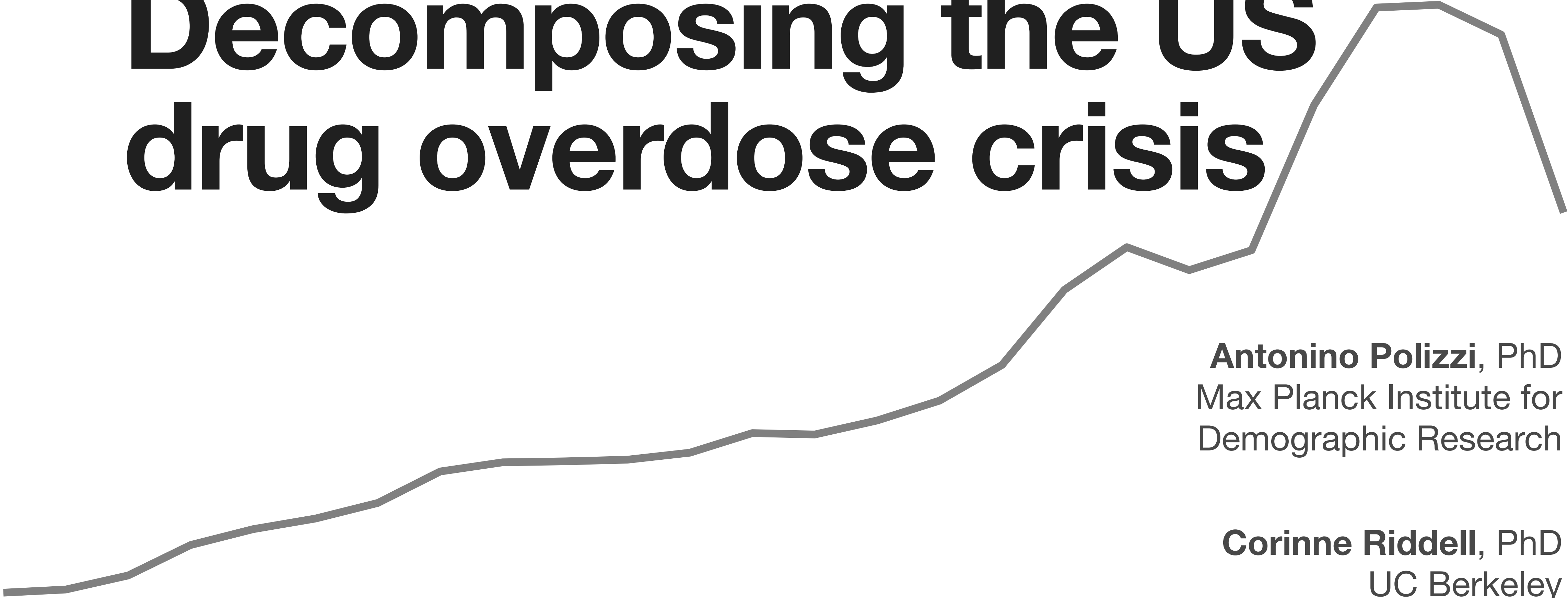


Decomposing the US drug overdose crisis



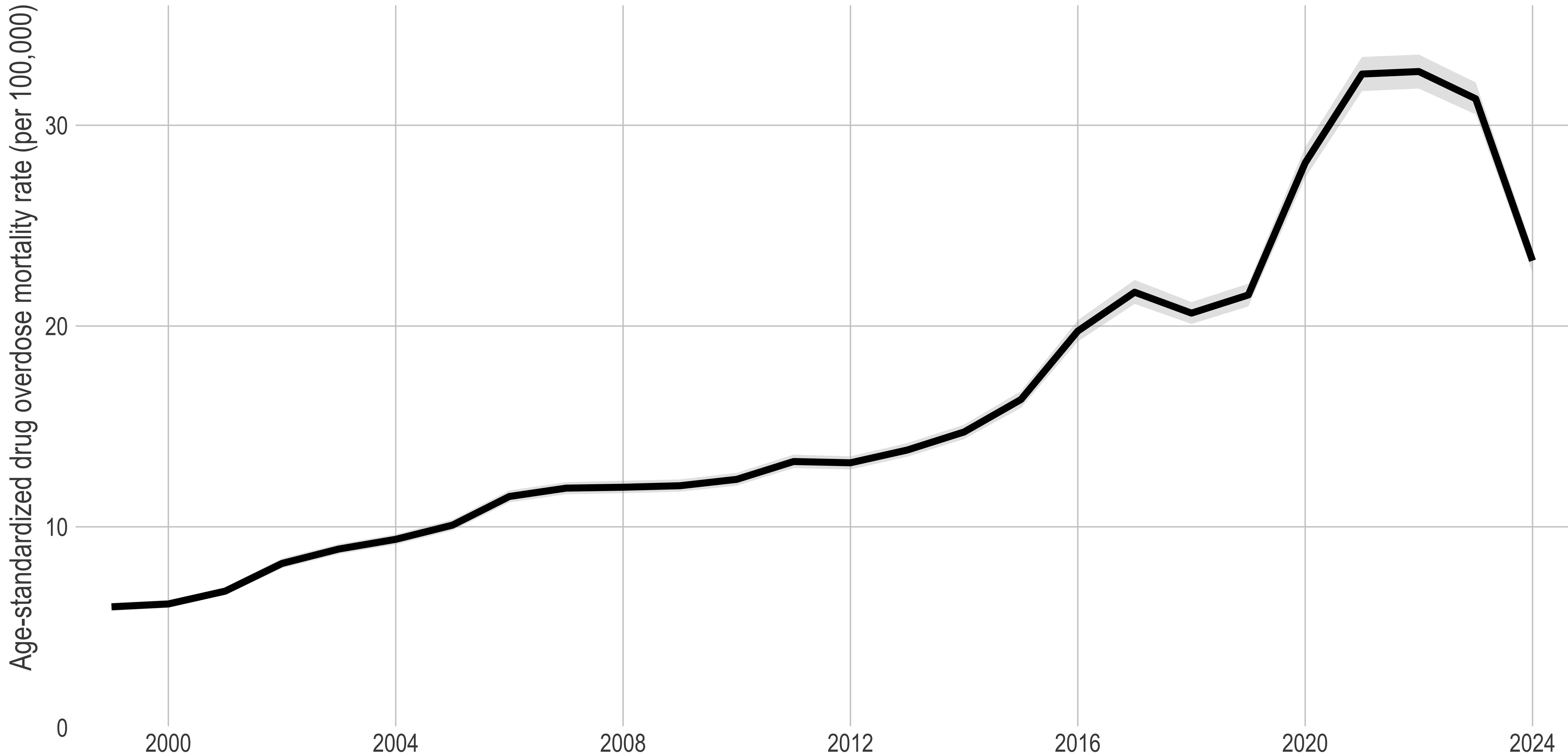
Antonino Polizzi, PhD
Max Planck Institute for
Demographic Research

Corinne Riddell, PhD
UC Berkeley

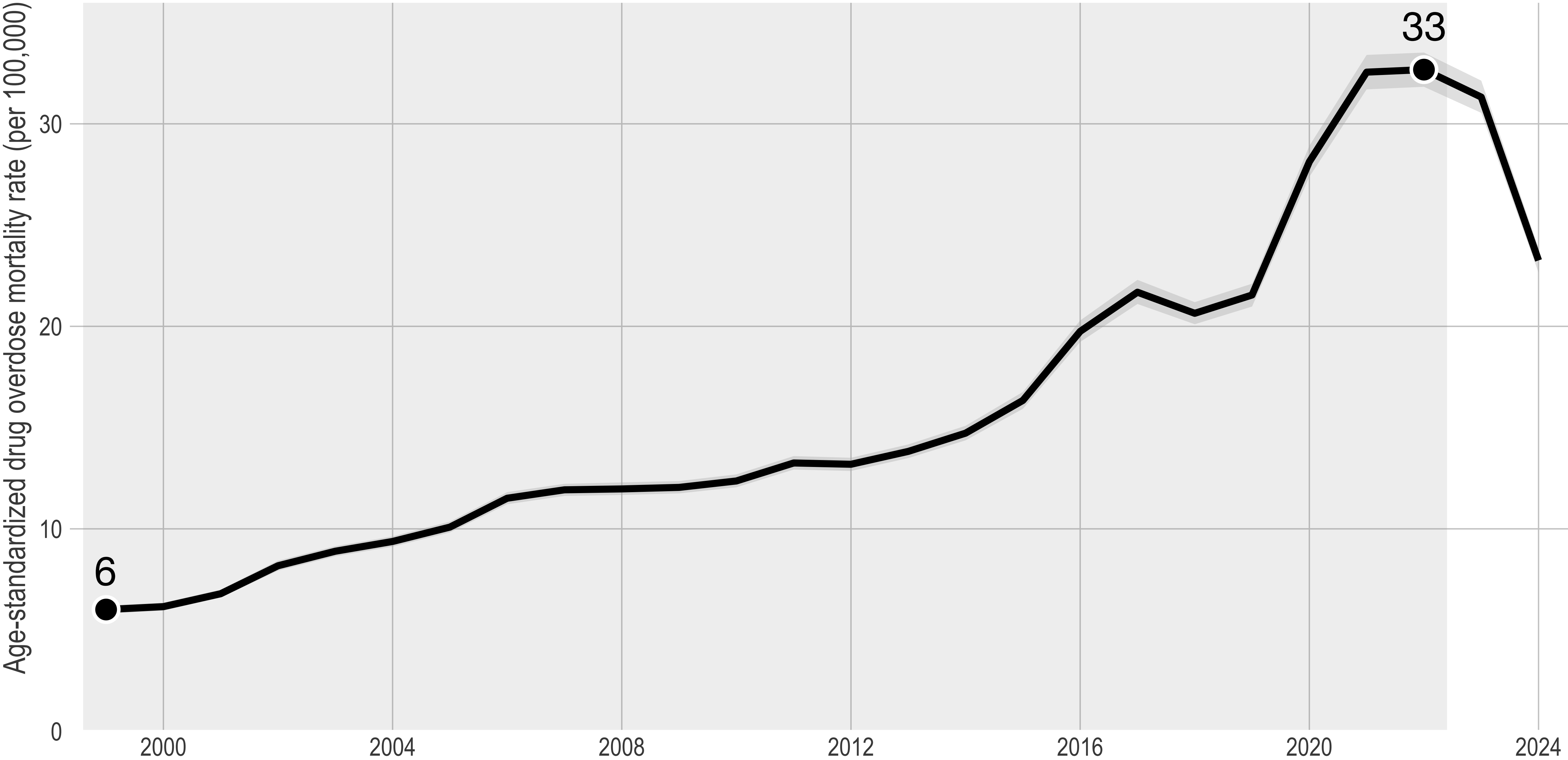
Mathew Kiang, ScD
Stanford University
mkiang@stanford.edu

Monica Alexander, PhD
University of Toronto

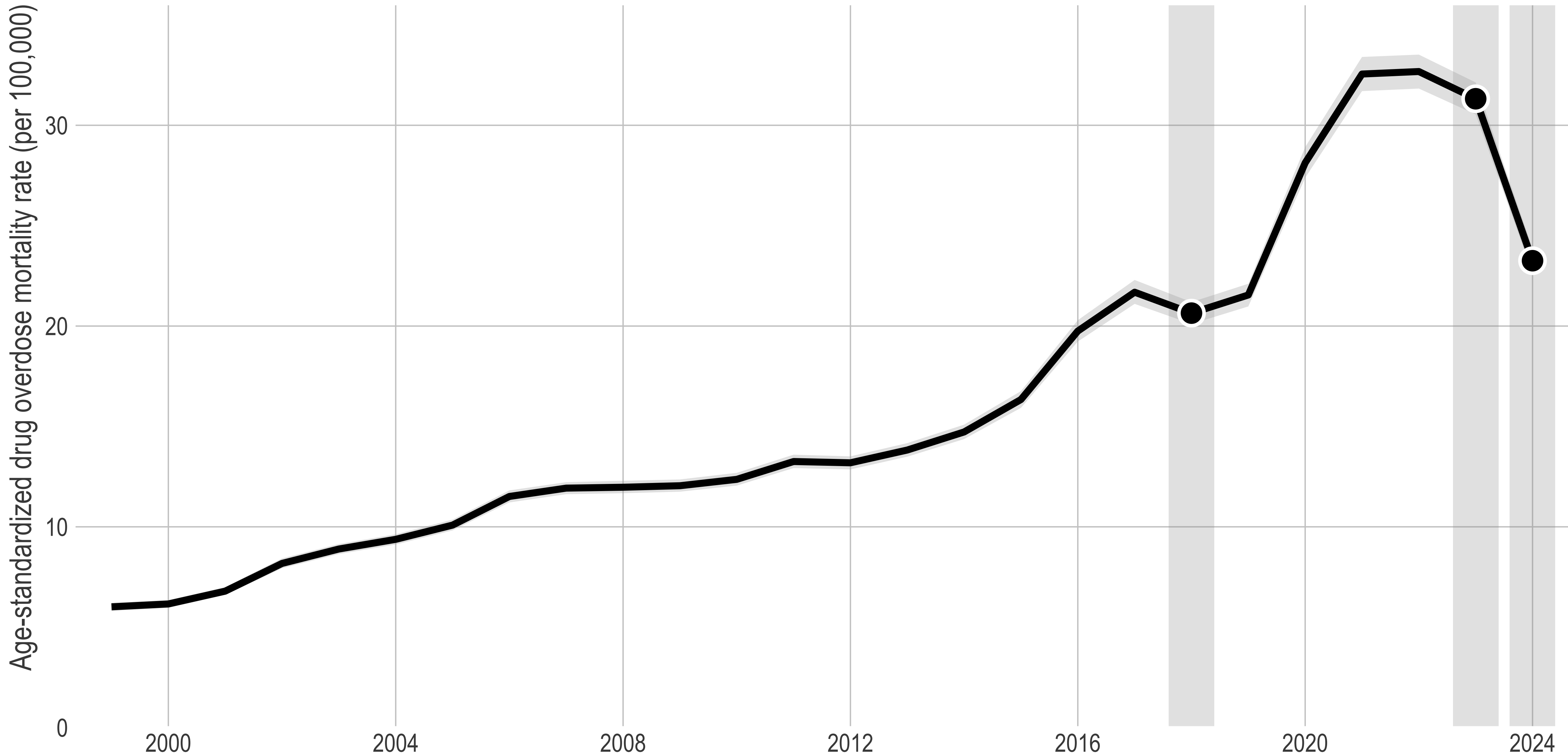
Over 1.3 million drug overdose deaths



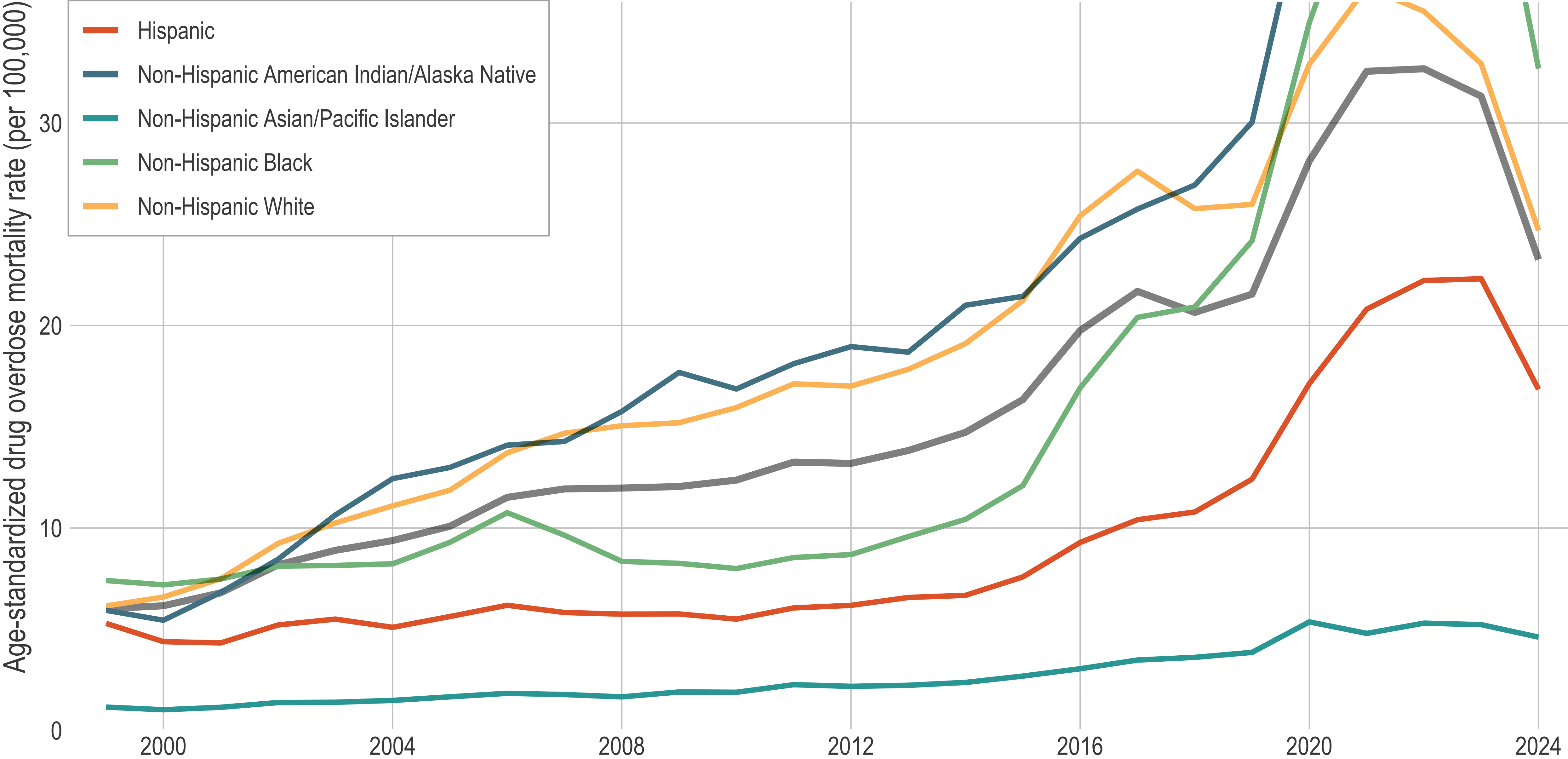
Over 5x increase from 1999 to 2022



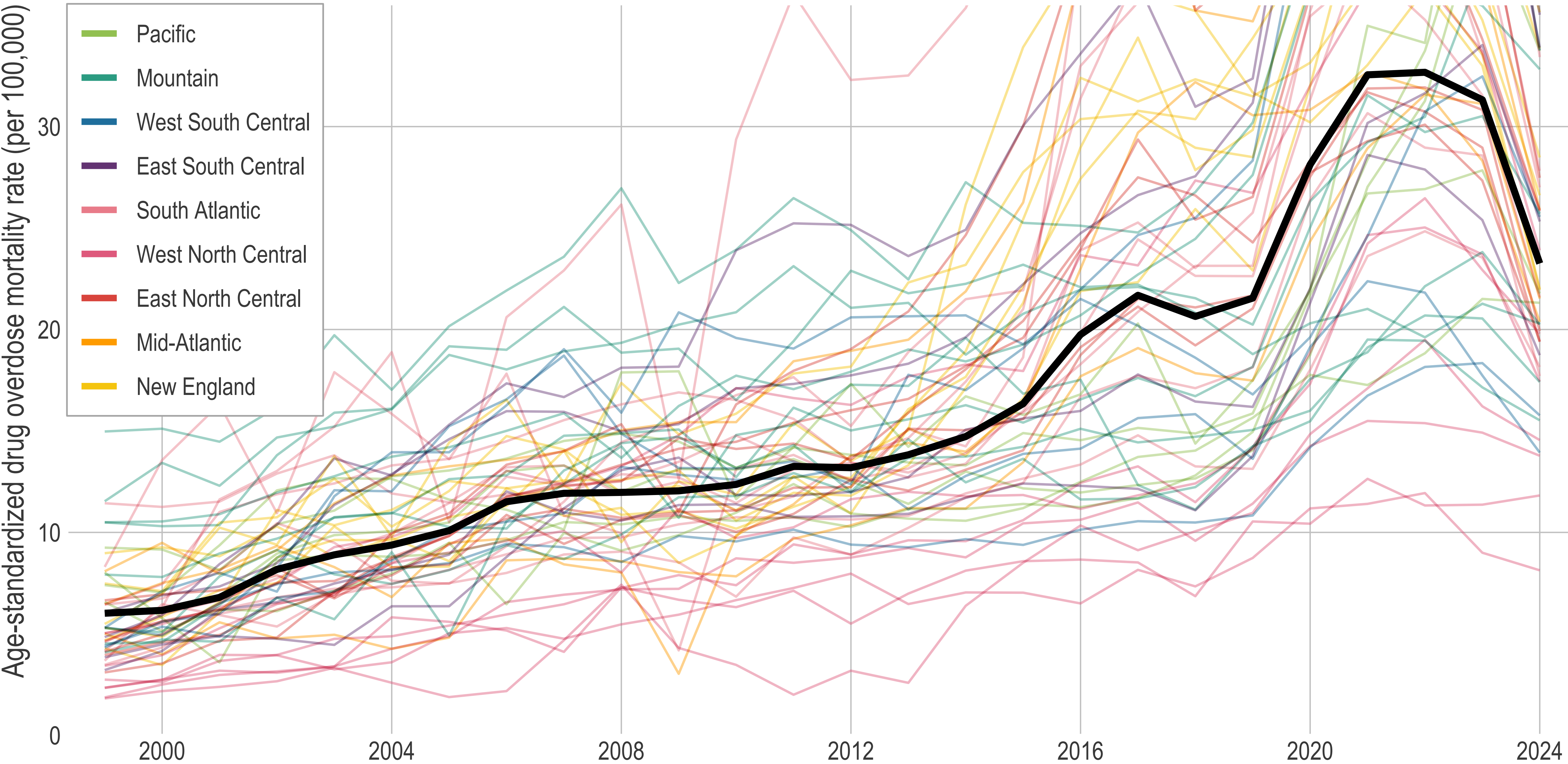
Only three year-over-year declines



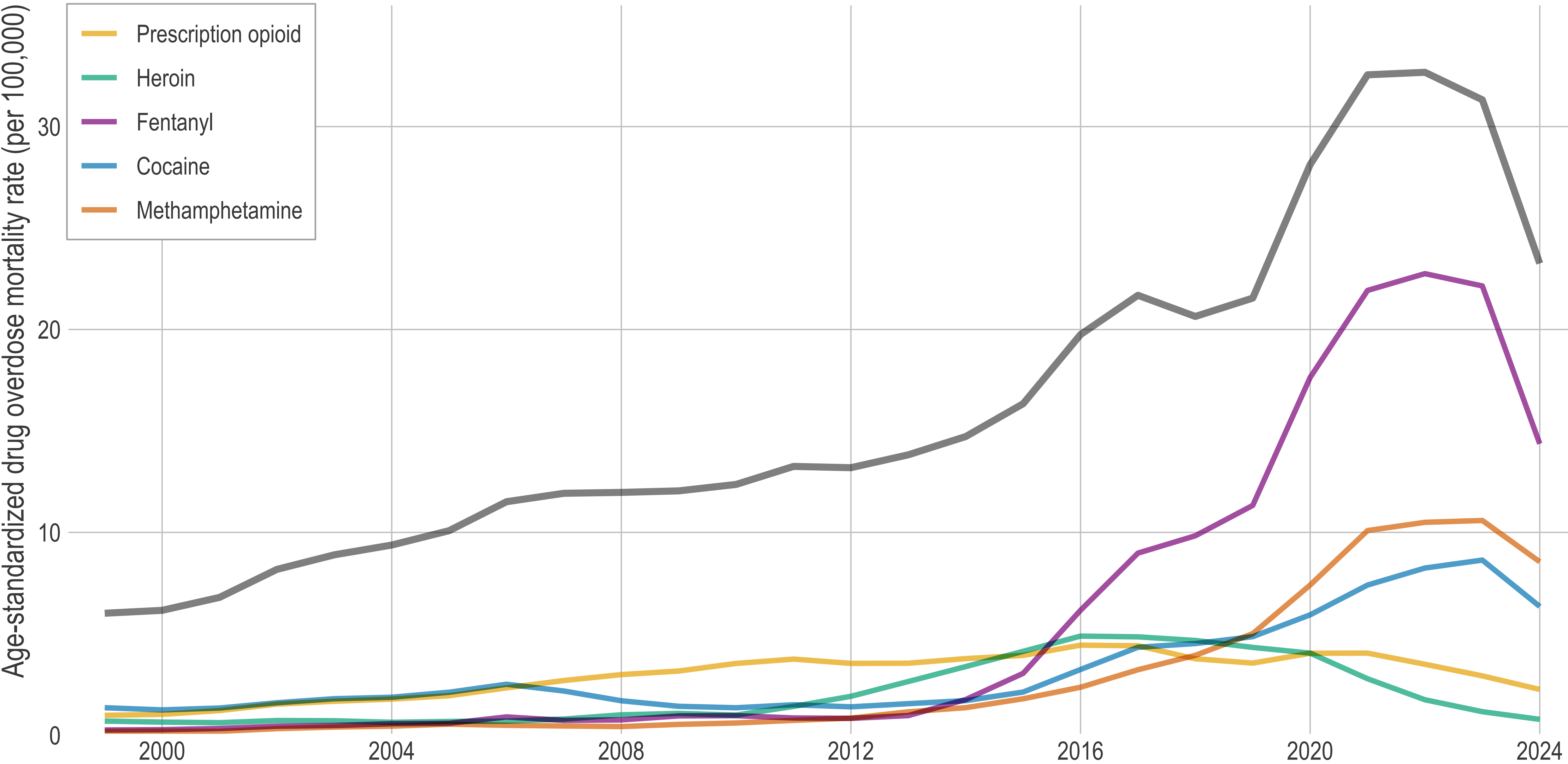
Racial and ethnic inequities



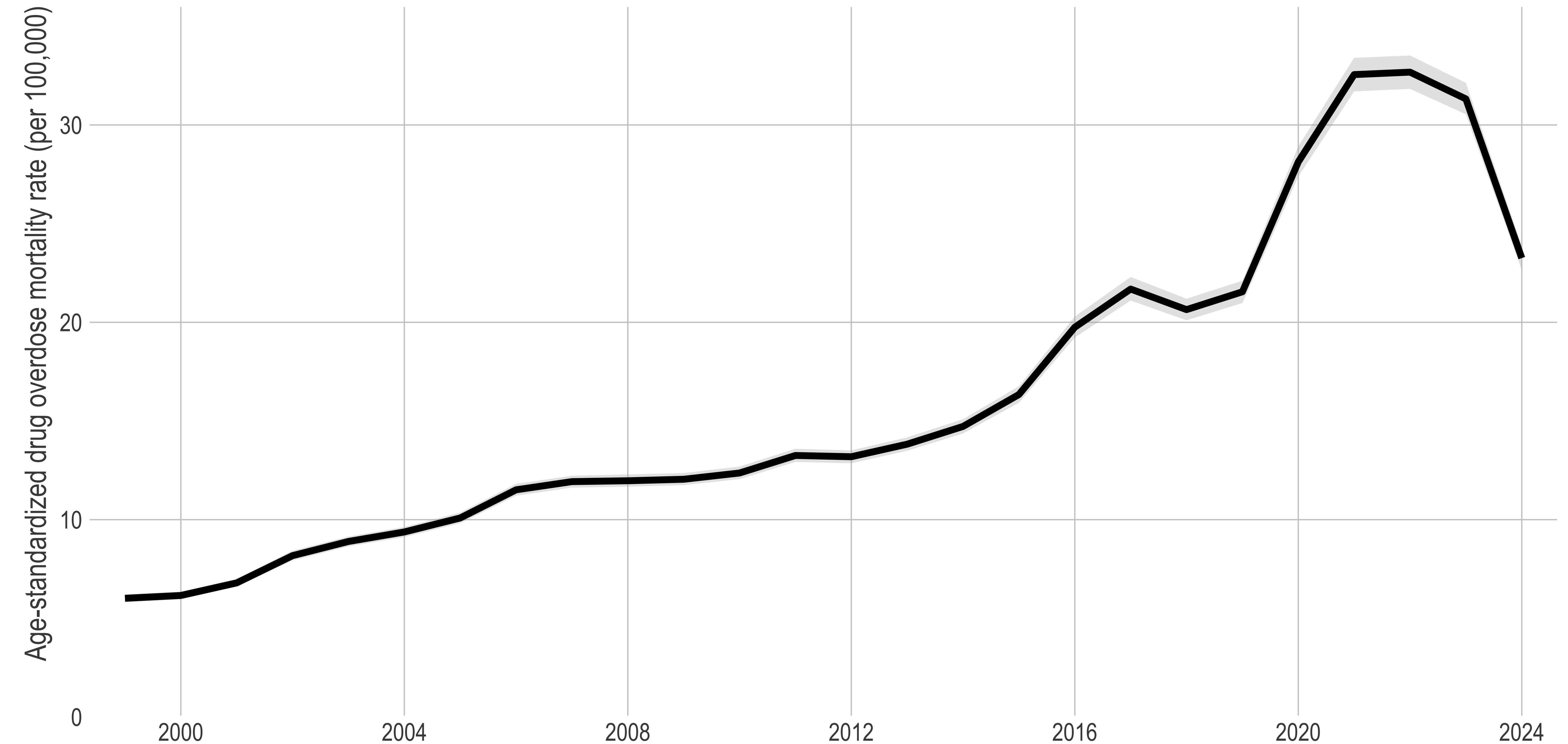
Geographic variation



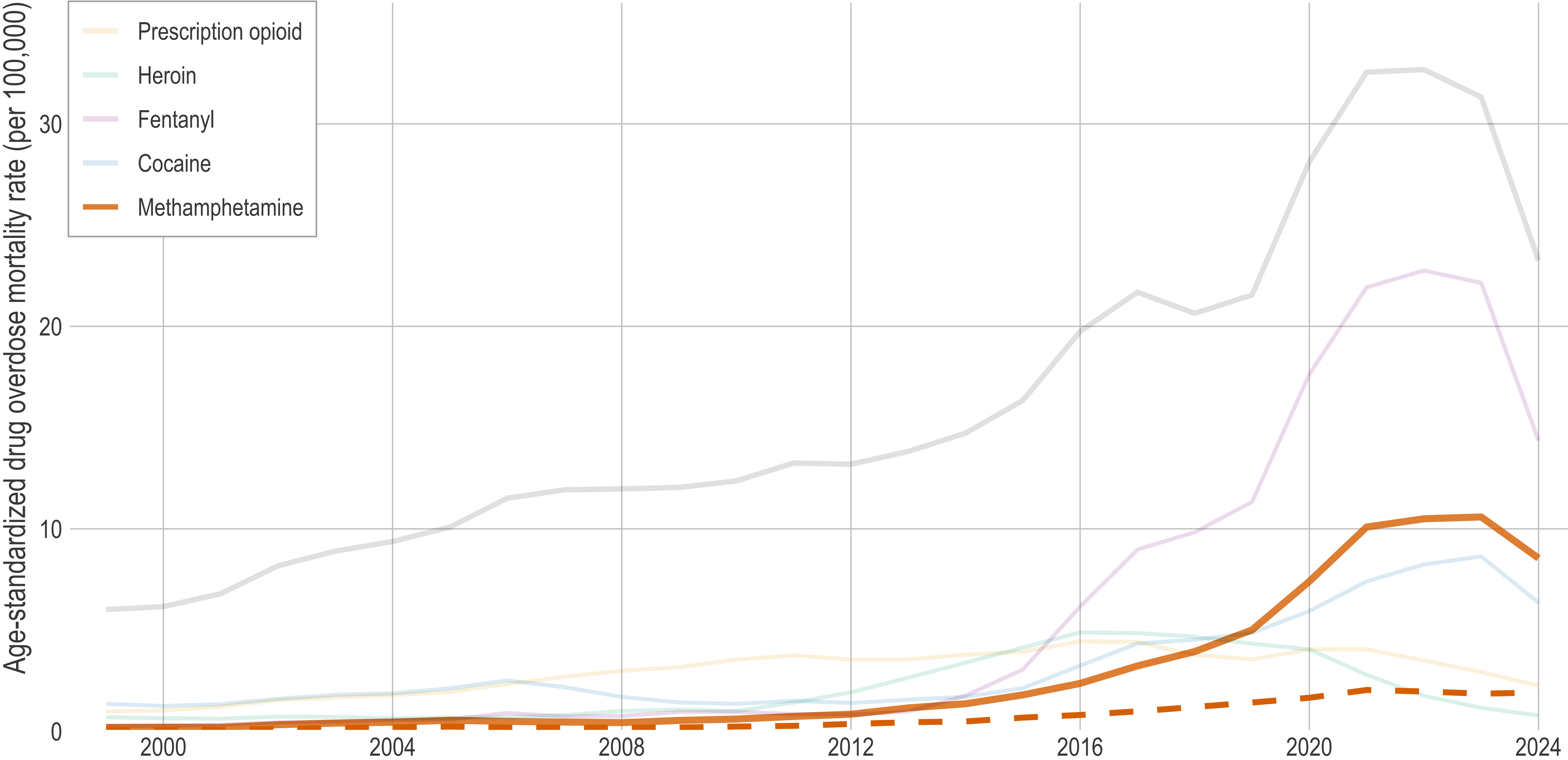
Different pharmacological drivers



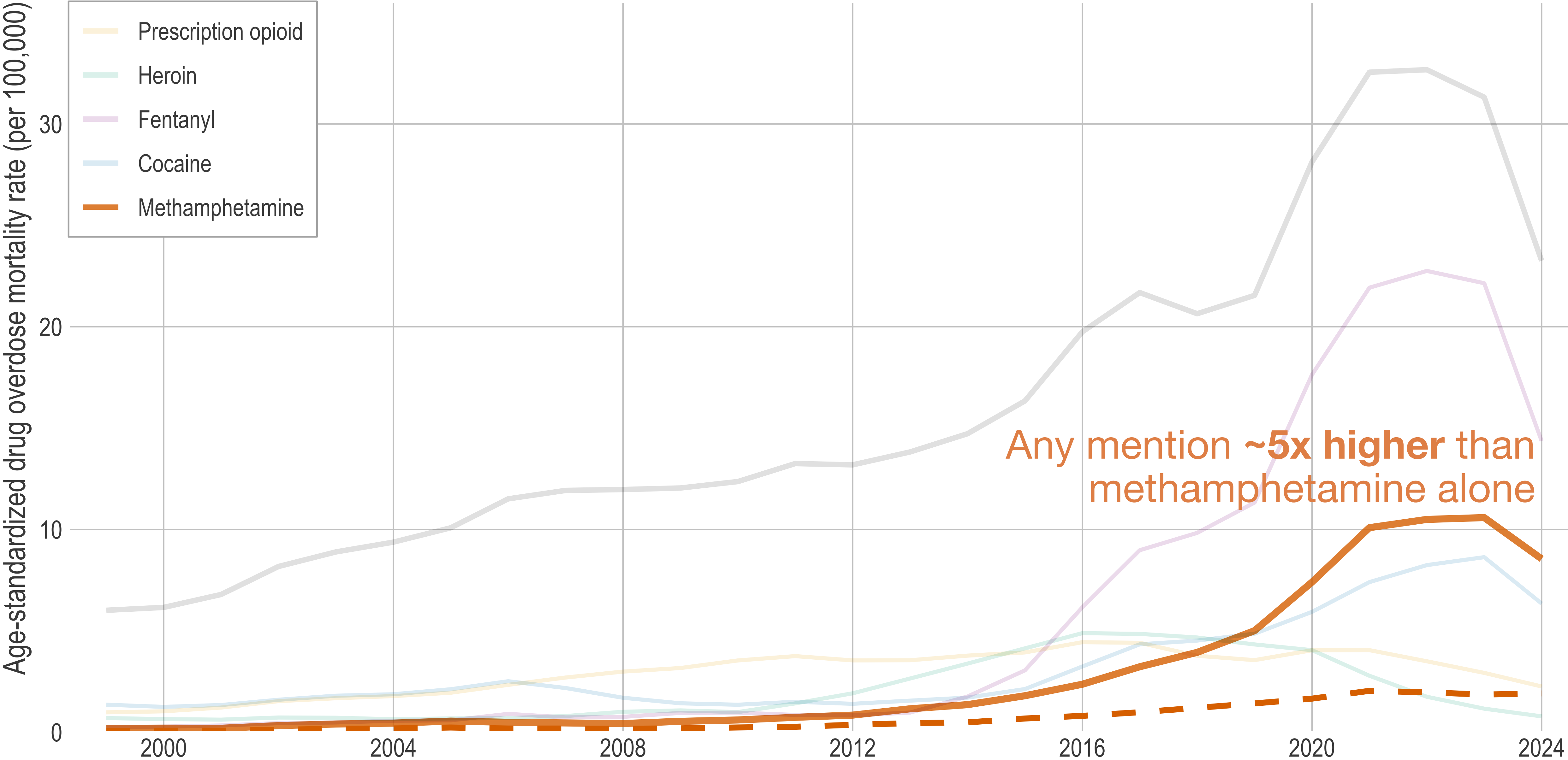
Typical approaches have two issues



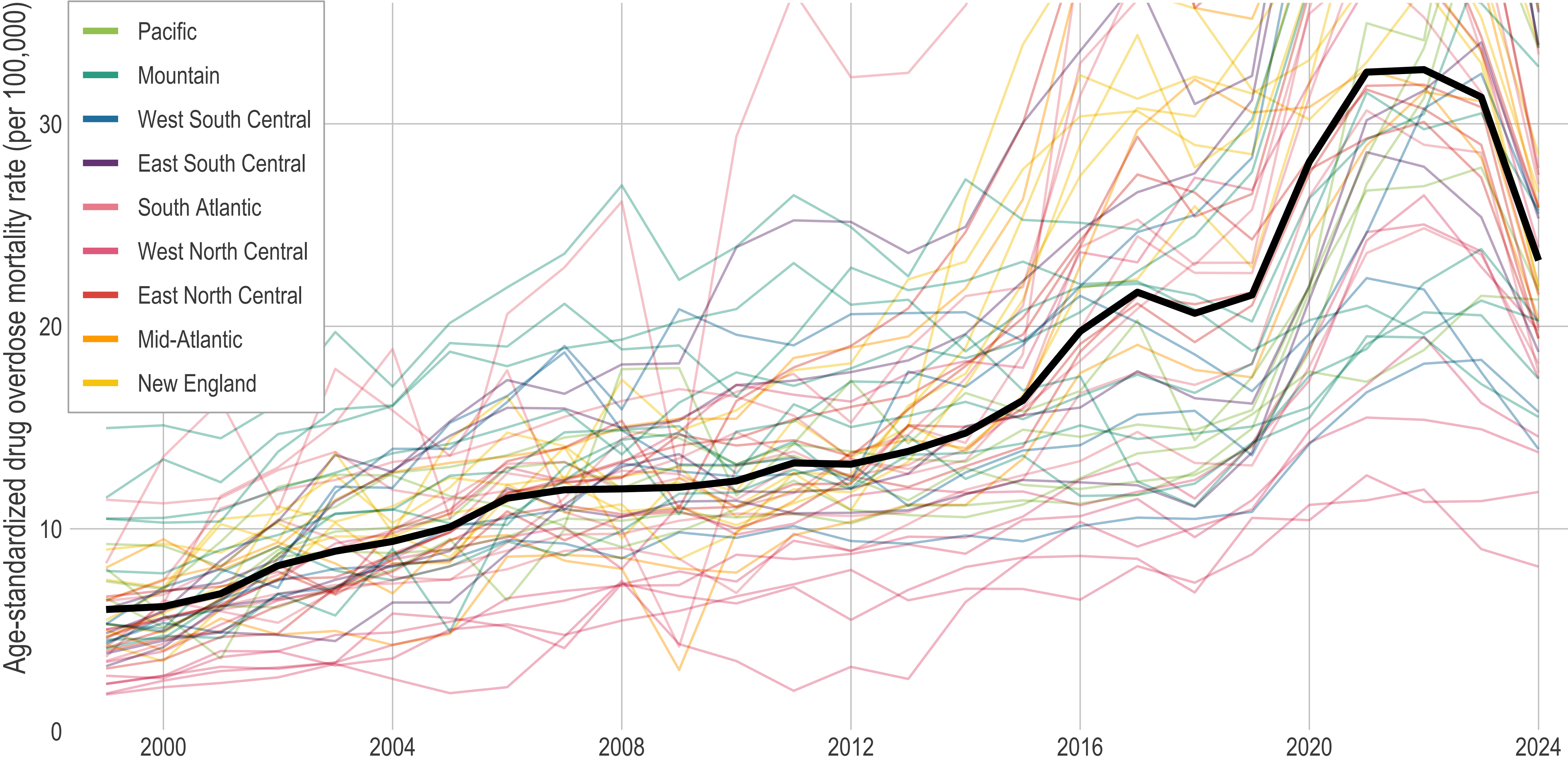
Issue 1: Double-counting deaths



Issue 1: Double-counting deaths



Issue 2: Unclear relationship between rates



**Develop a more nuanced
description of the US drug
overdose crisis:**

Develop a more nuanced description of the US drug overdose crisis:

1. What drove the *rise* in deaths from 1999 to 2022?

Develop a more nuanced description of the US drug overdose crisis:

1. What drove the *rise* in deaths from 1999 to 2022?
2. What drove the *decline* in deaths?

Methods

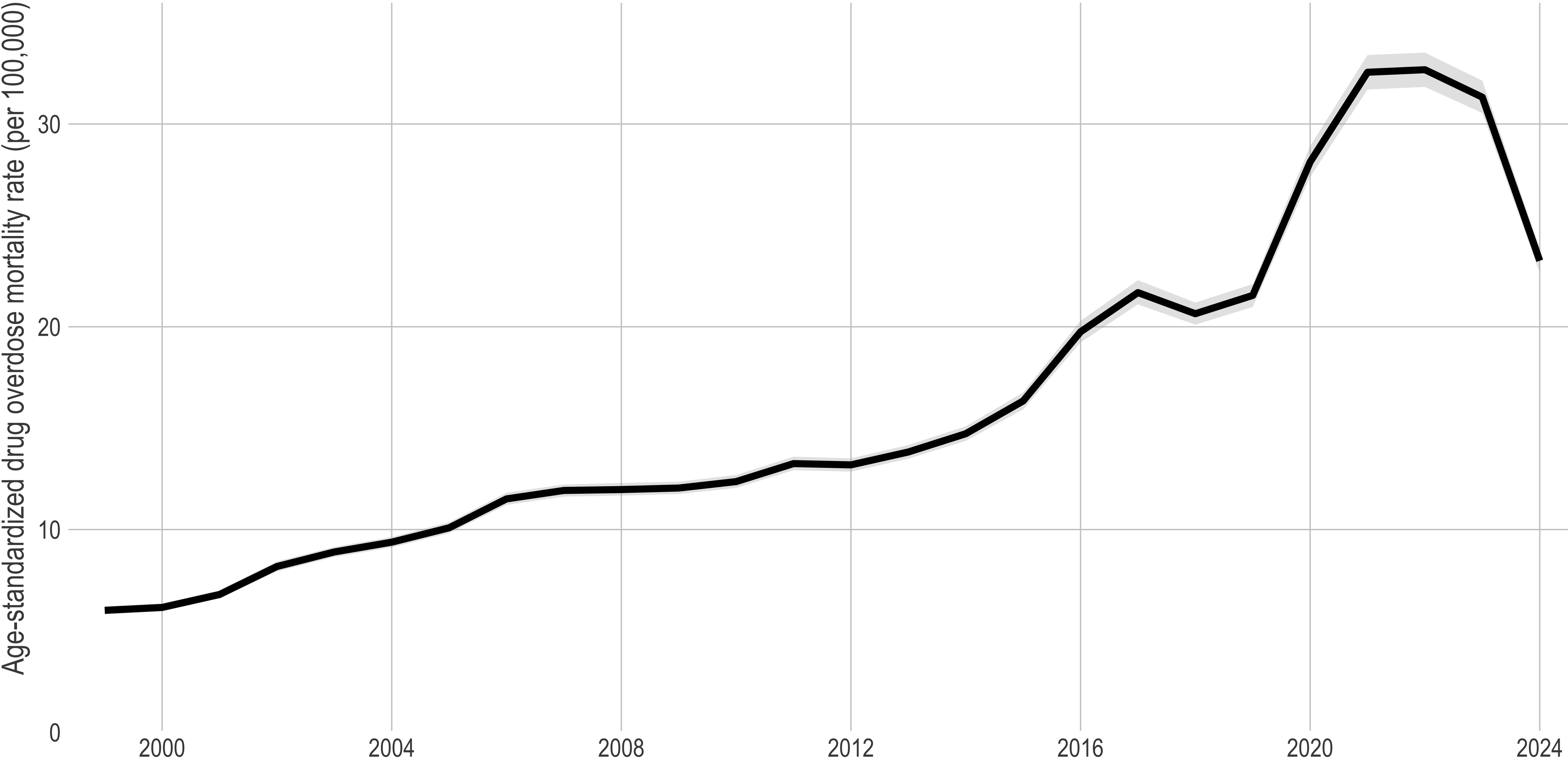
Data

- Restricted multiple cause of death data from NCHS, 1999-2024
- All 1.33 million drug deaths are classified into 1 of **15 mutually-exclusive drug groupings** (no double counting).
 - For example:
 - Methamphetamine alone vs fentanyl + methamphetamine
 - Cocaine alone vs fentanyl + cocaine
- SEER population denominators

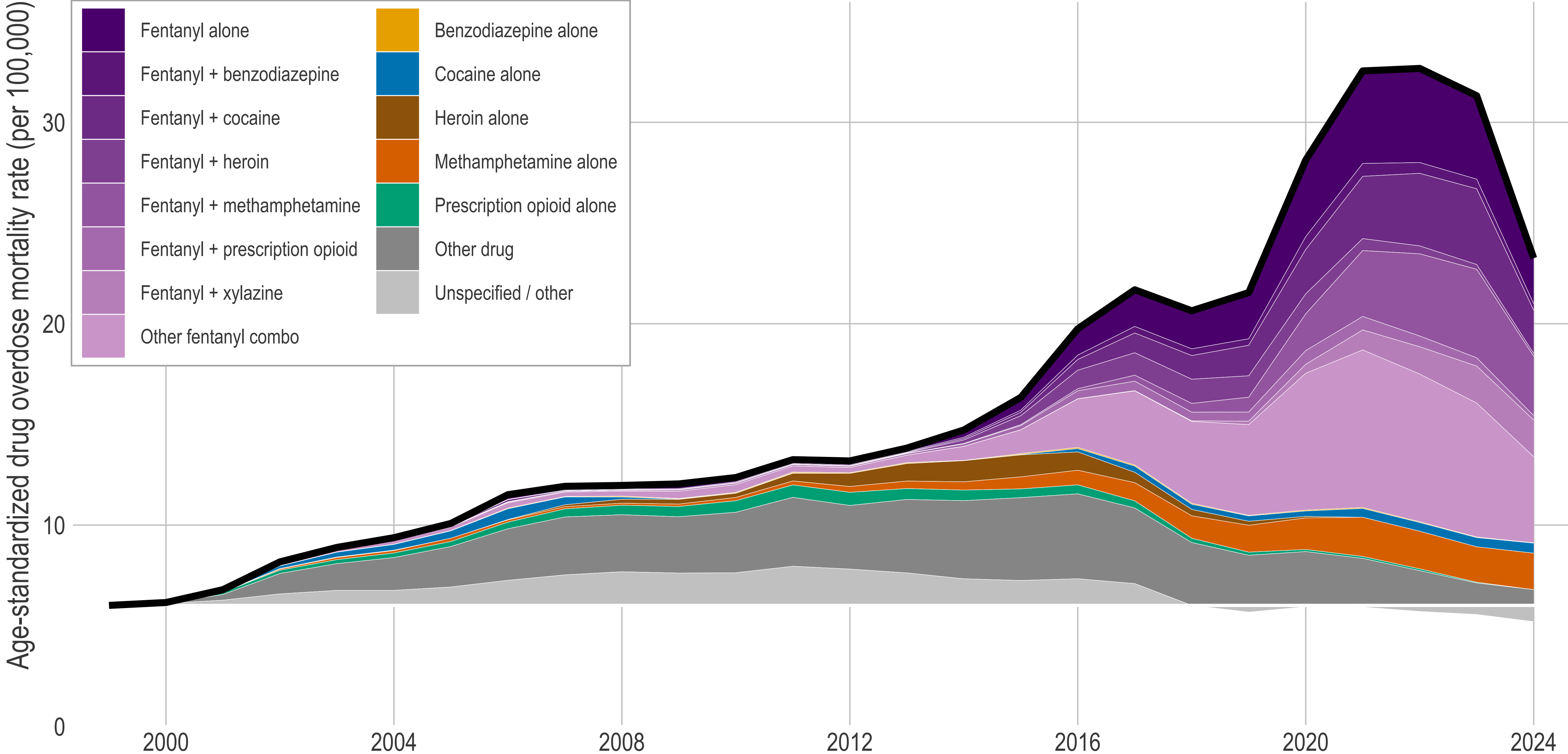
Analytic approach

- Use a generalized Kitagawa decomposition to partition the **change** in the rate into substance- and geography-specific contributions (also age, sex, and race but not discussed)
- Uncertainty intervals generated via Monte Carlo simulation using a negative binomial distribution on deaths ($B=5,000$)

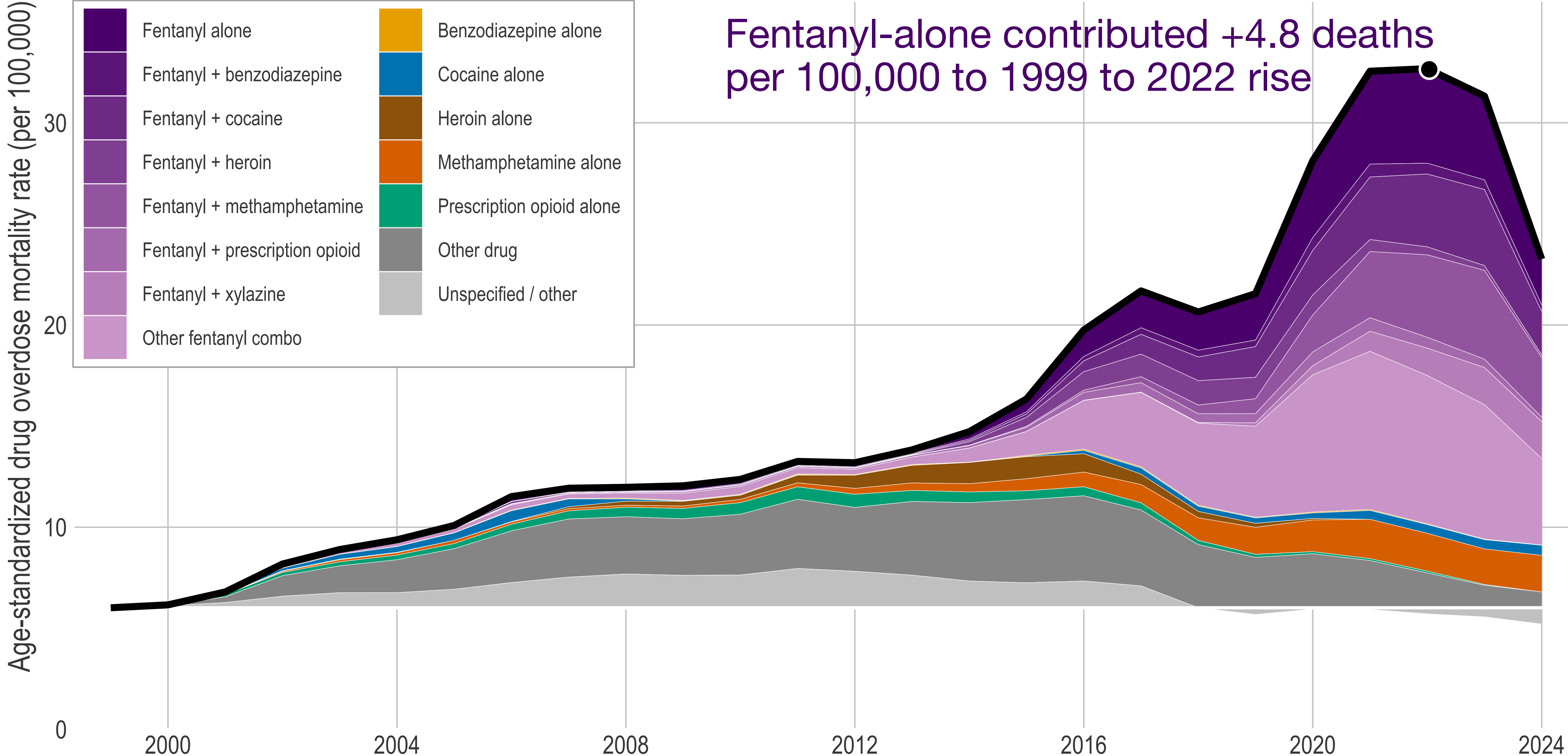
National rate change decomposed into...



Contribution of specific drug combinations

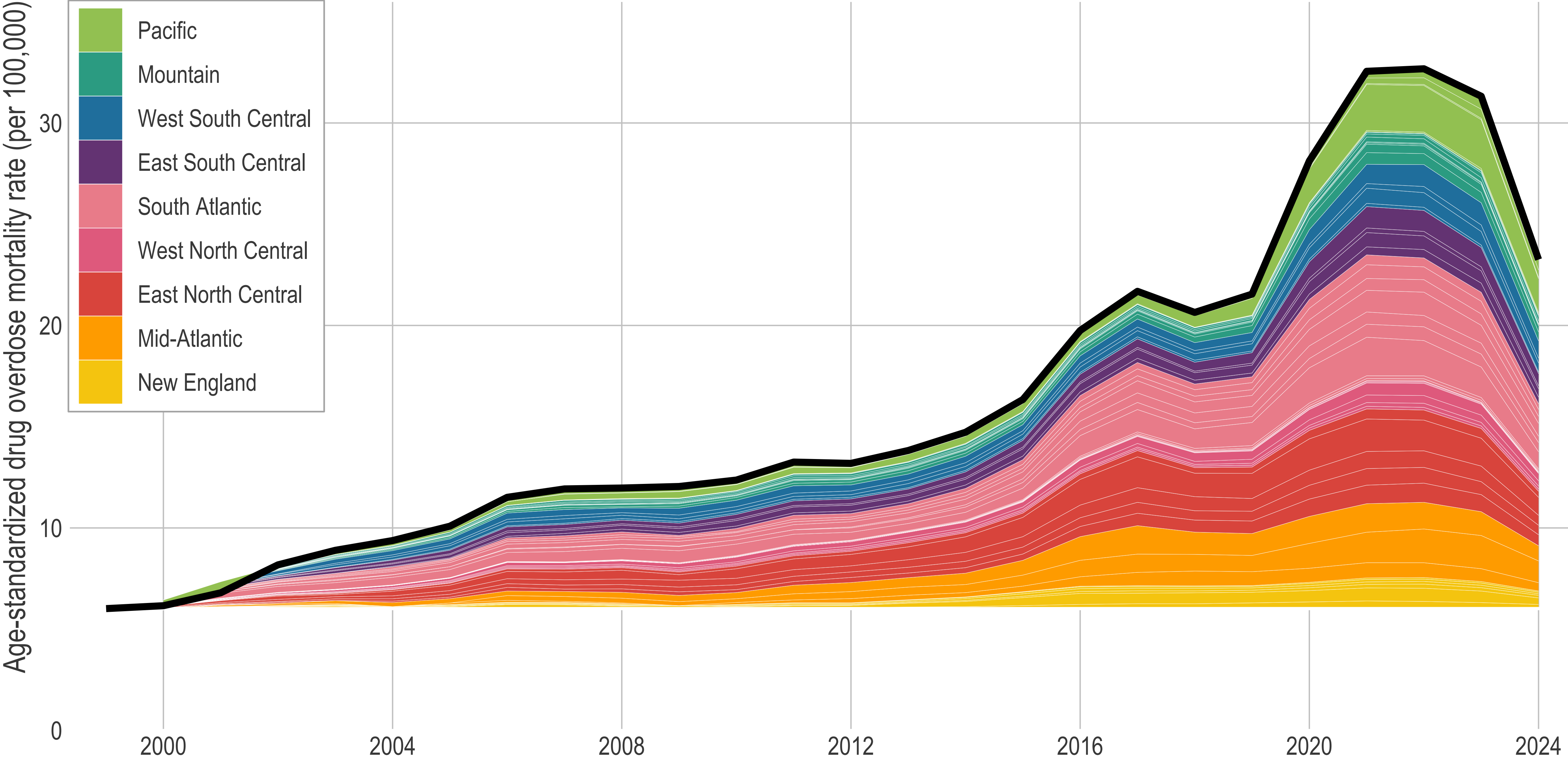


Contribution of specific drug combinations

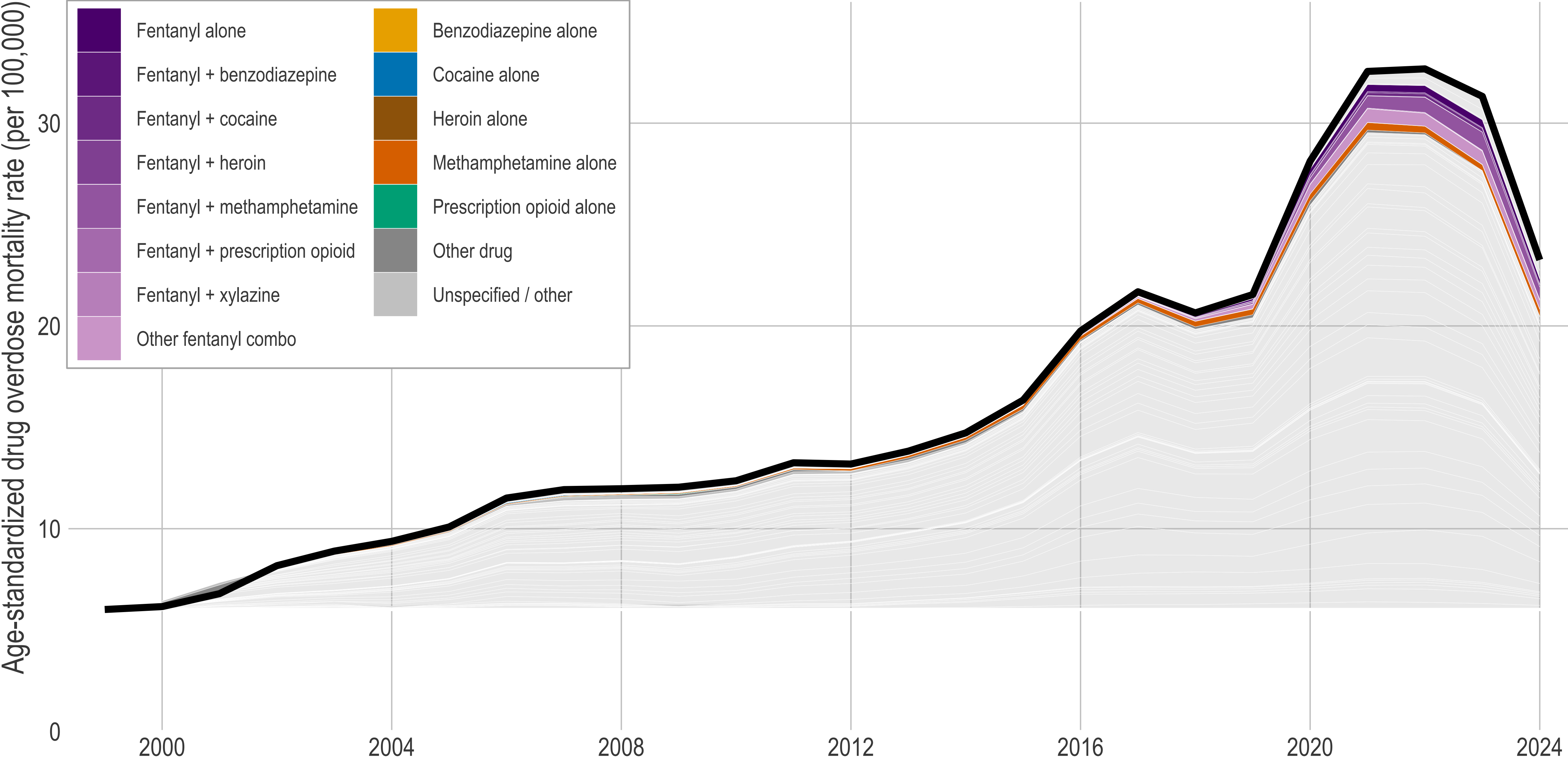


Fentanyl-alone contributed +4.8 deaths per 100,000 to 1999 to 2022 rise

Or the contribution of each state



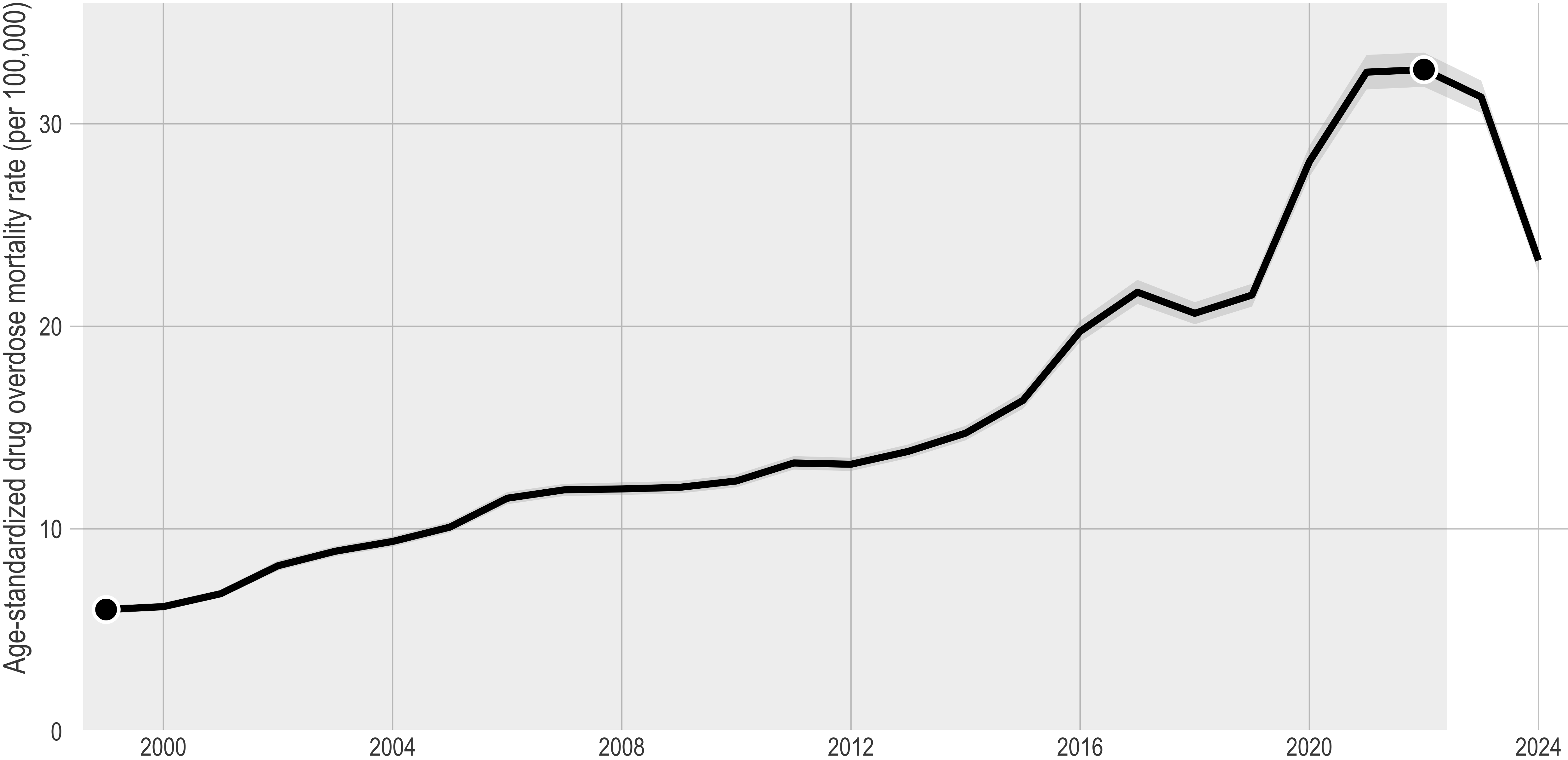
Or both (California)



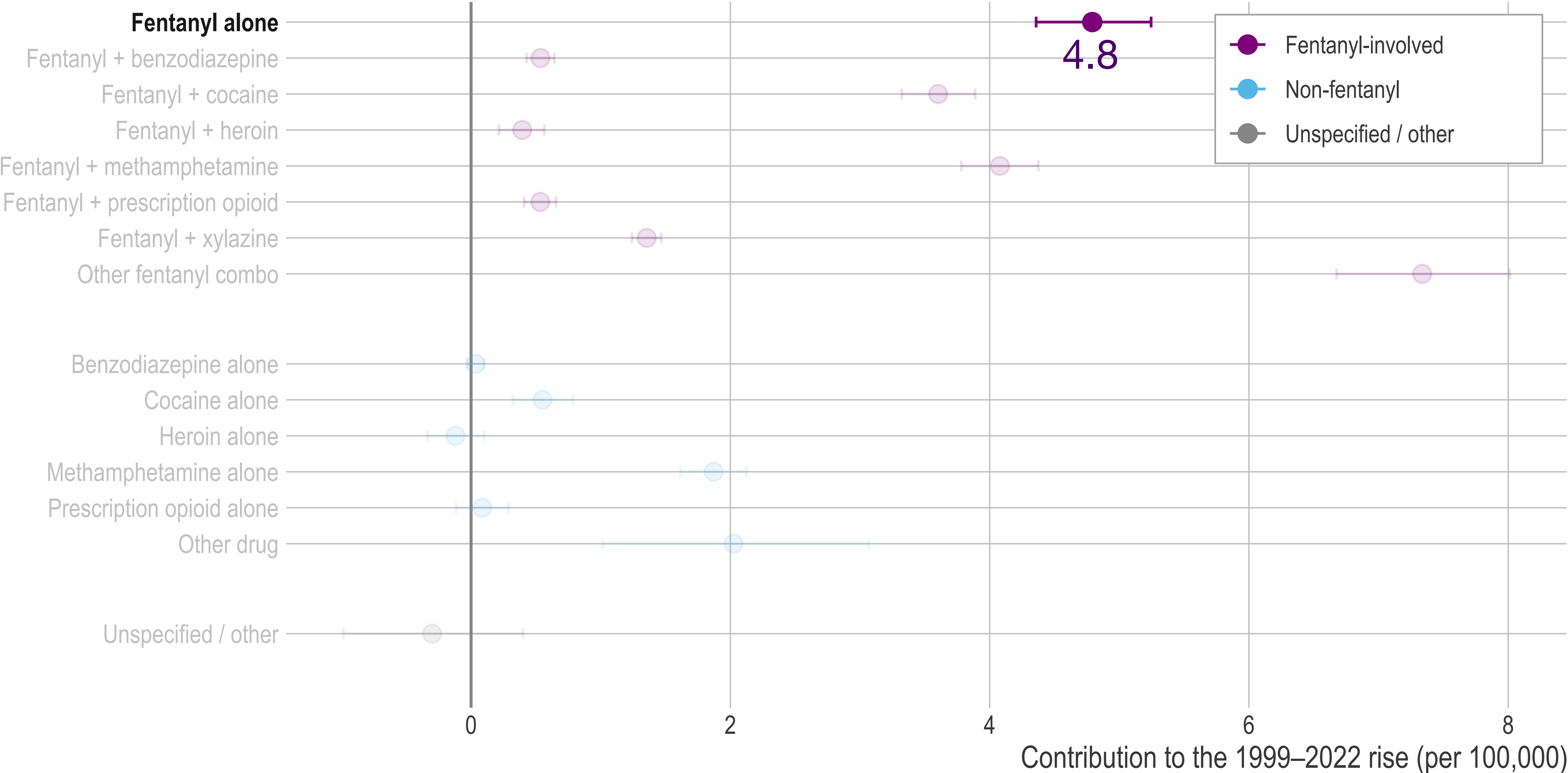
Results:

The rise

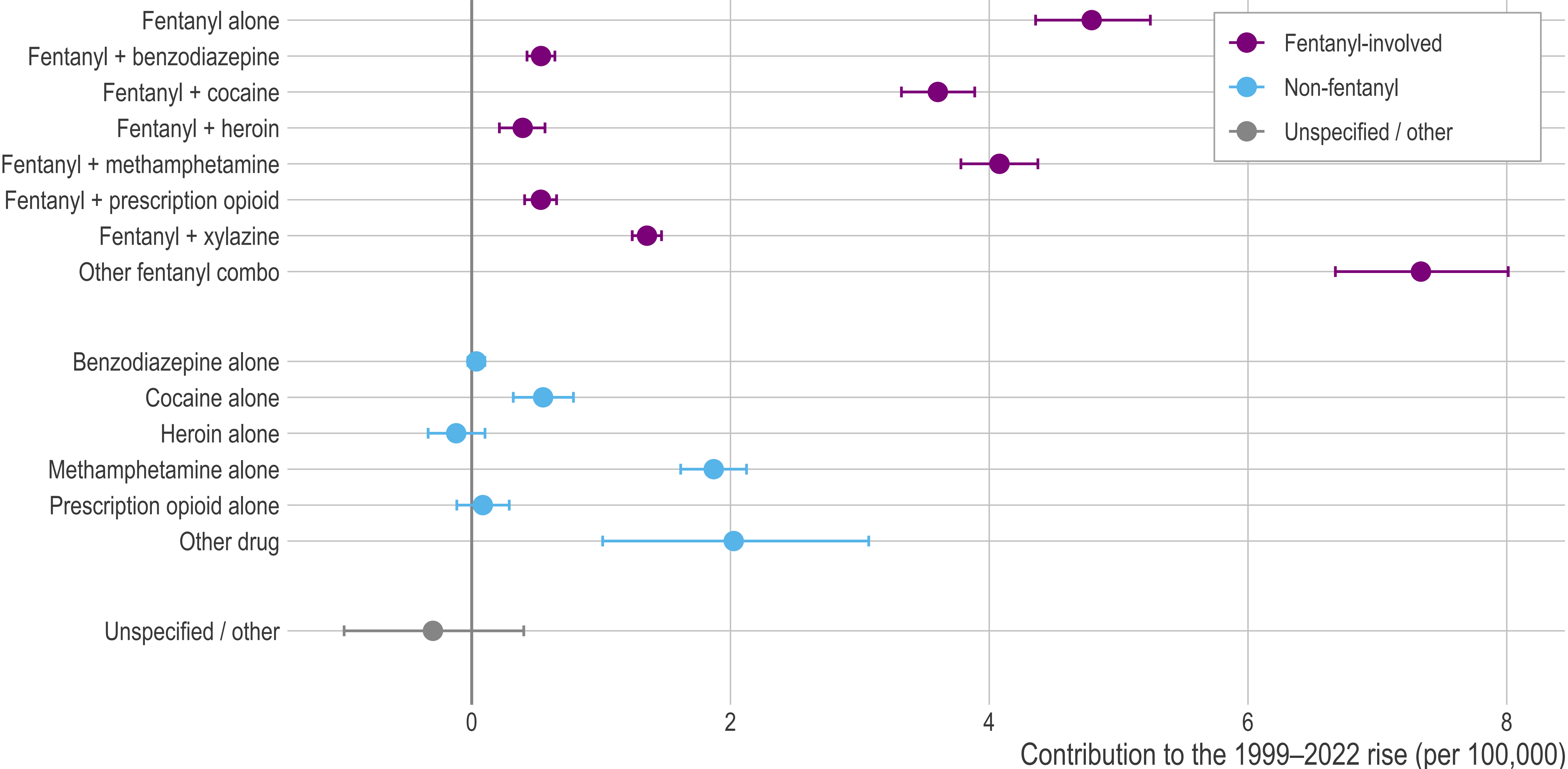
Increase of ~27 deaths per 100,000



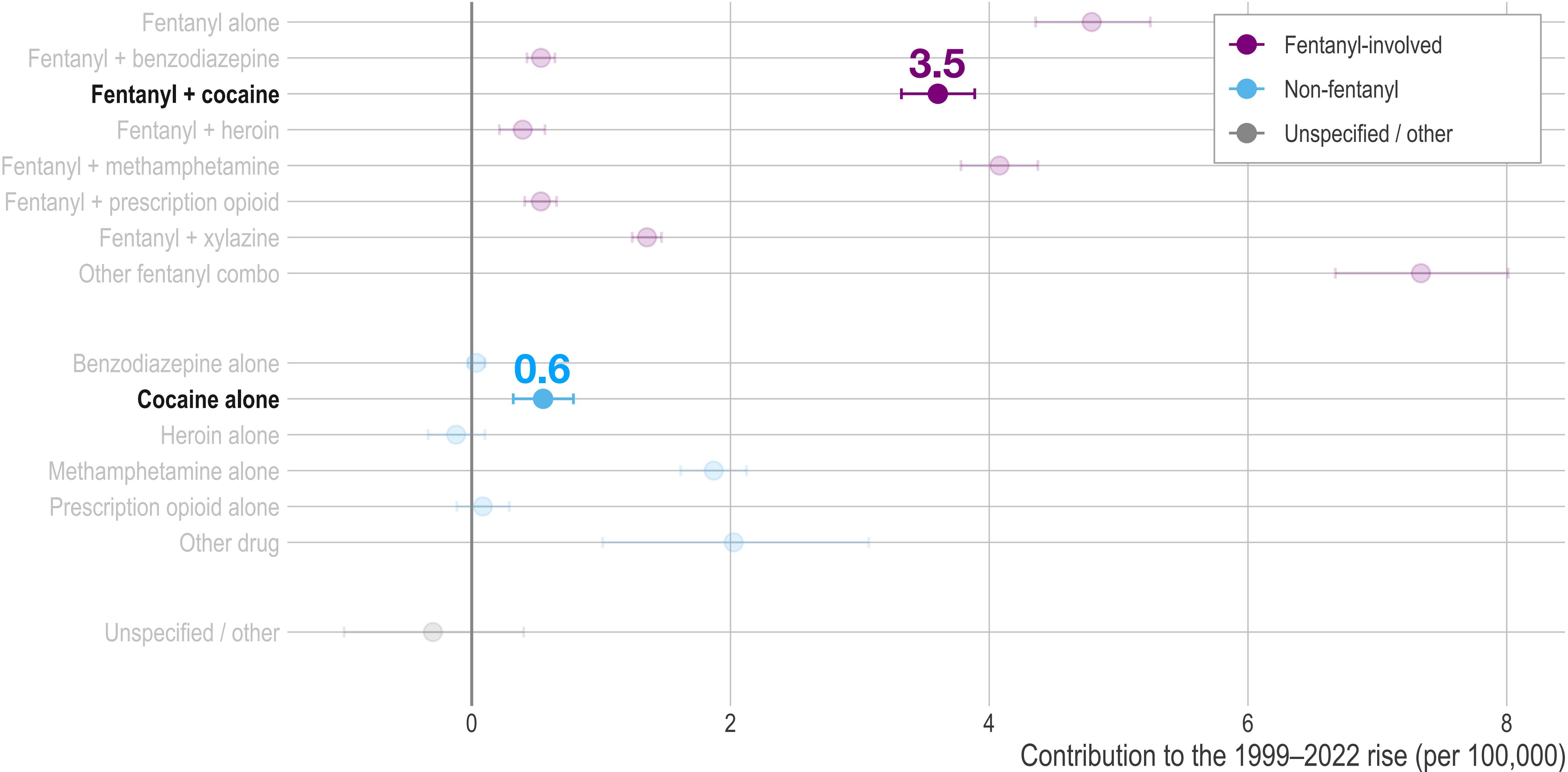
Fentanyl-alone largest (specified) contributor



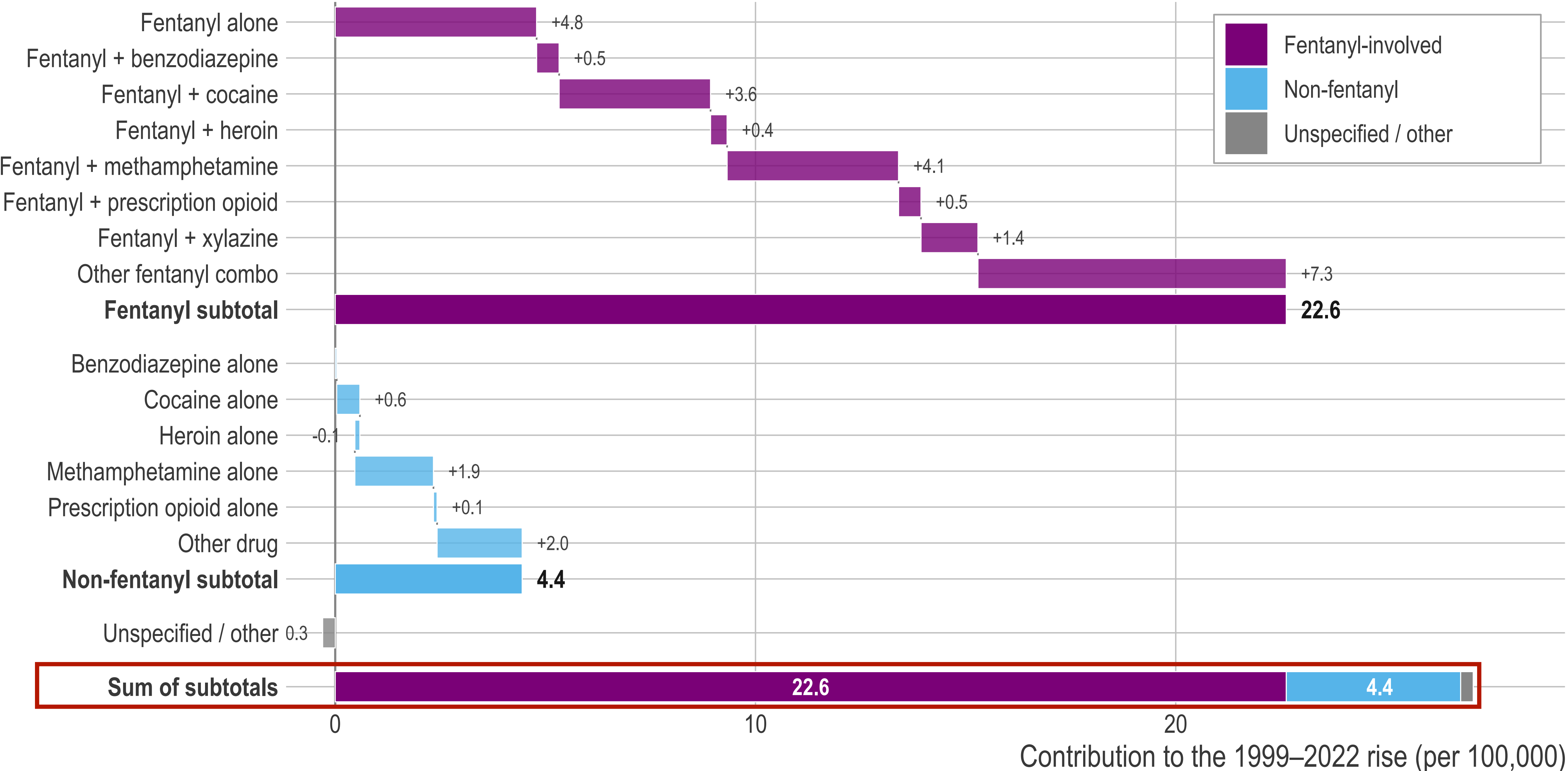
Substance-specific contributions vary widely



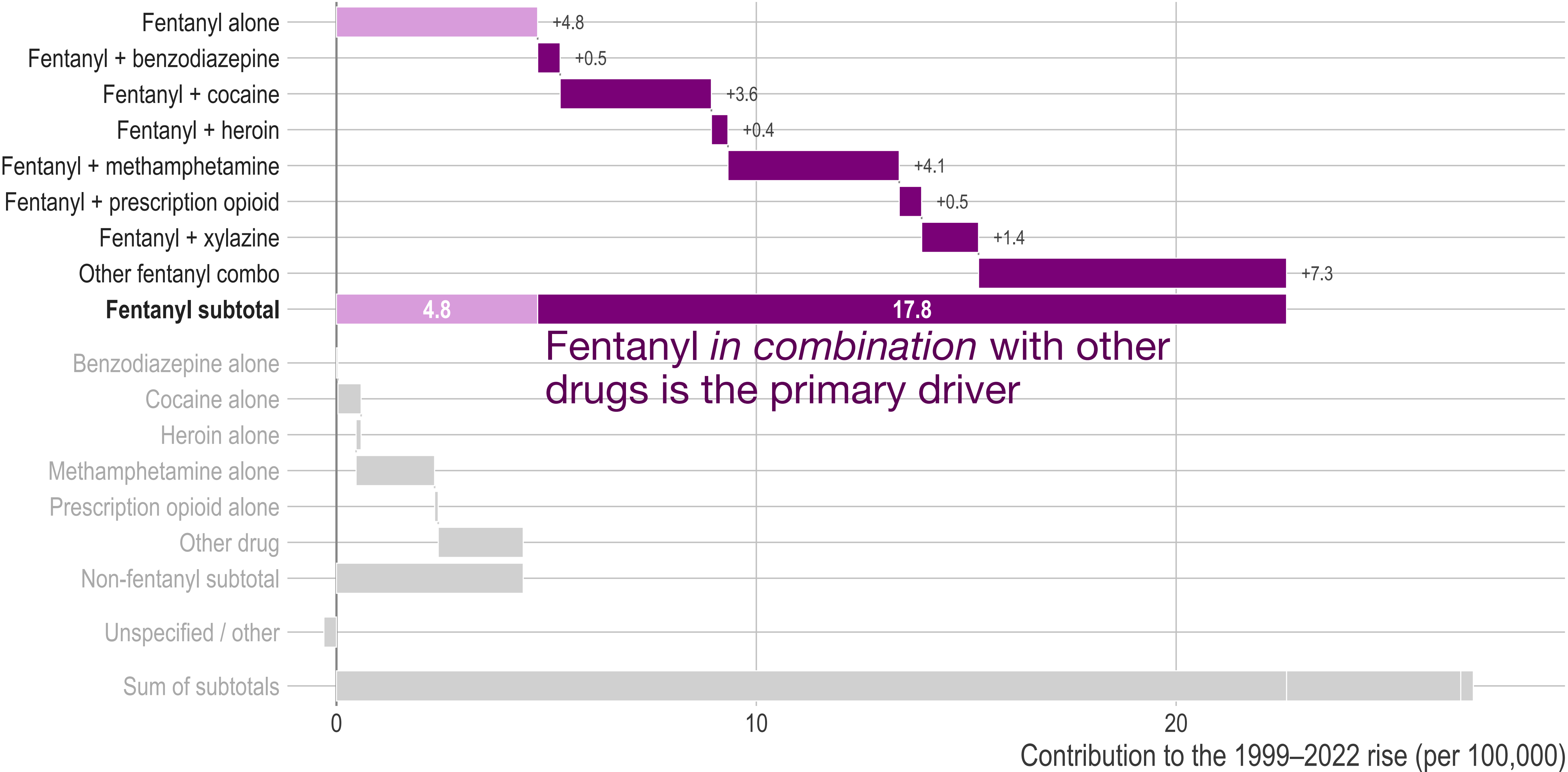
Fentanyl + cocaine ~6x higher



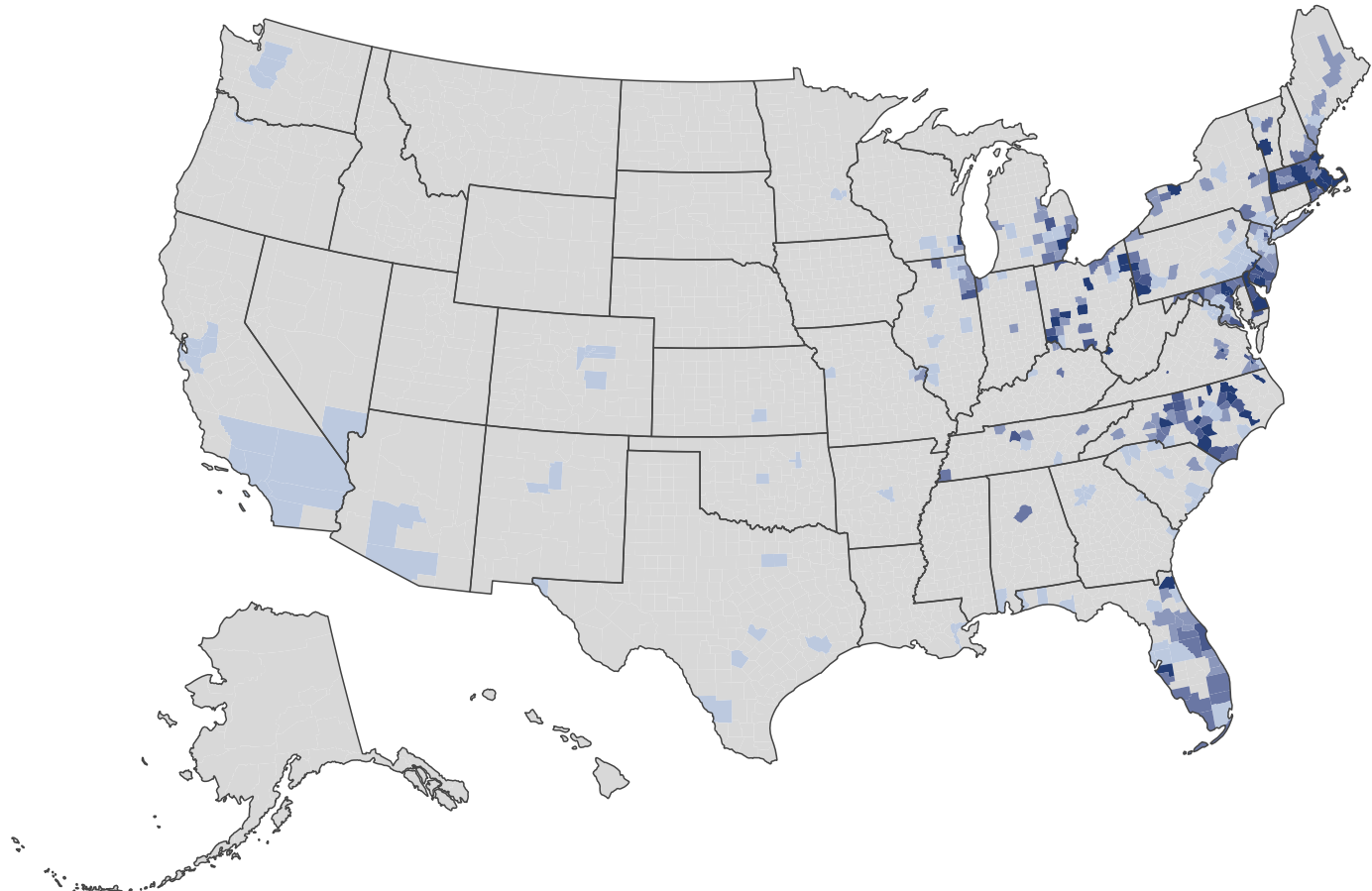
Fentanyl contributed 85% of the rise



But only 25% of that was fentanyl alone



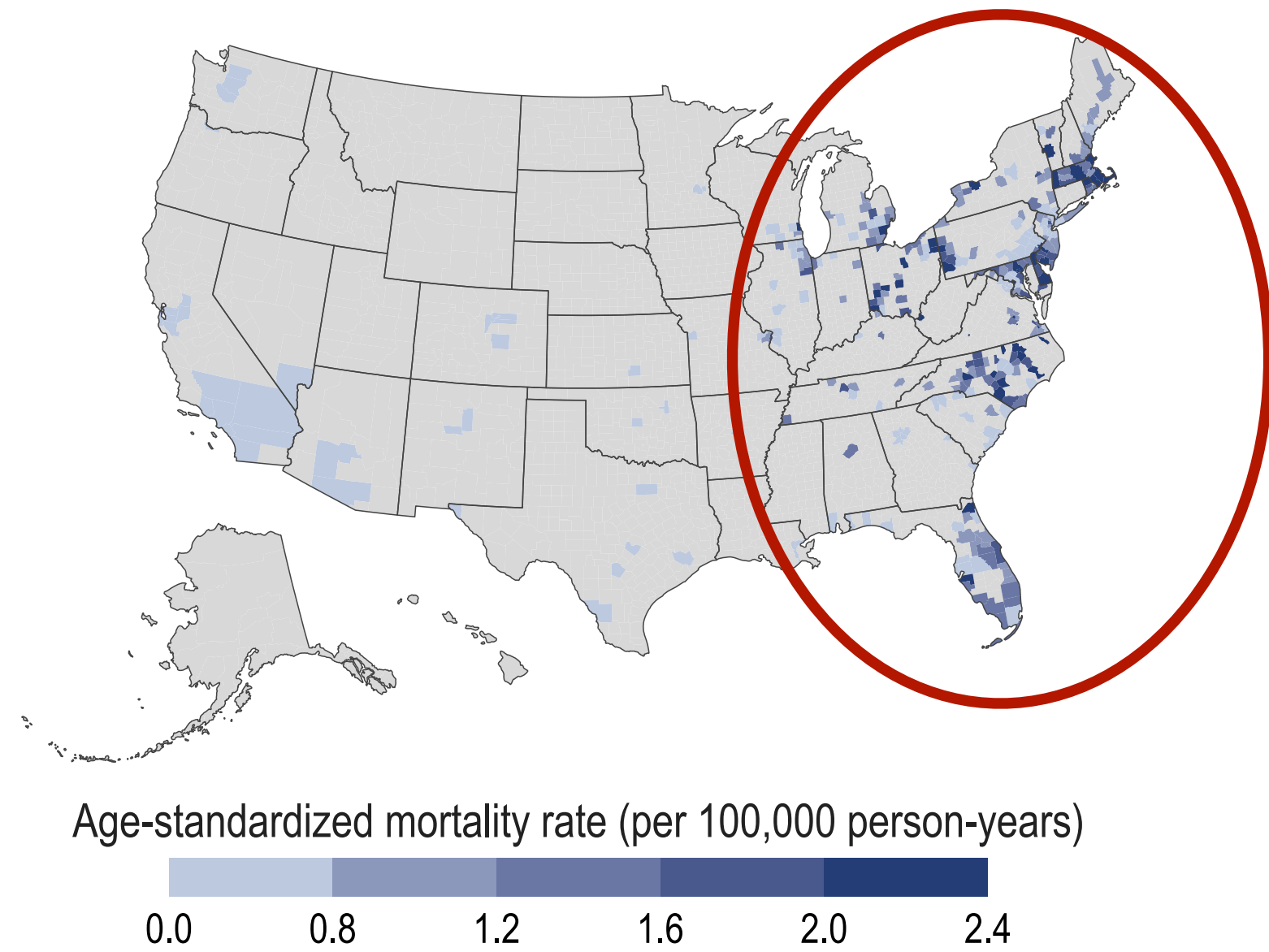
Cocaine + fentanyl mortality rate



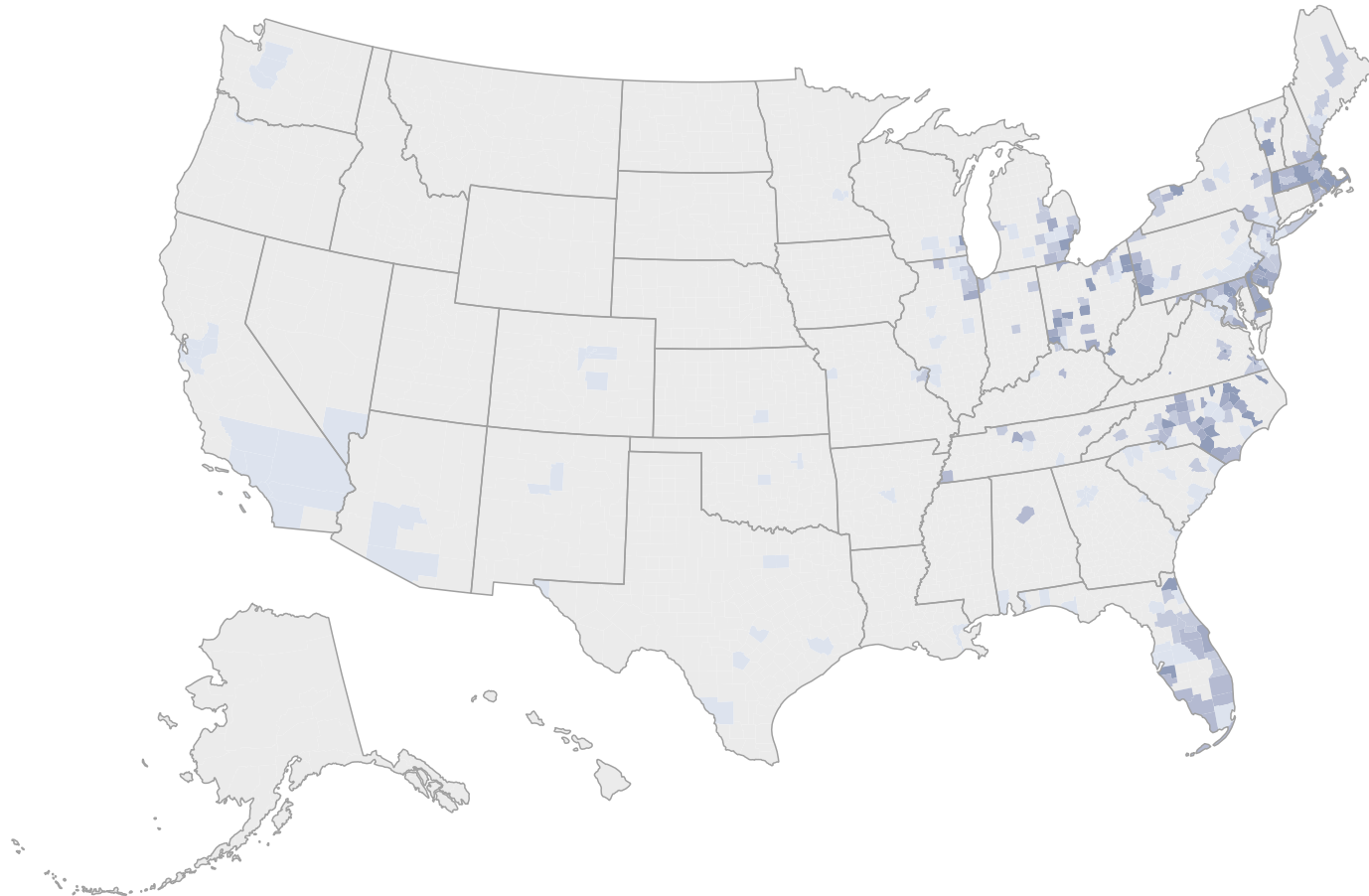
Age-standardized mortality rate (per 100,000 person-years)



When looking at rates, eastern US problem

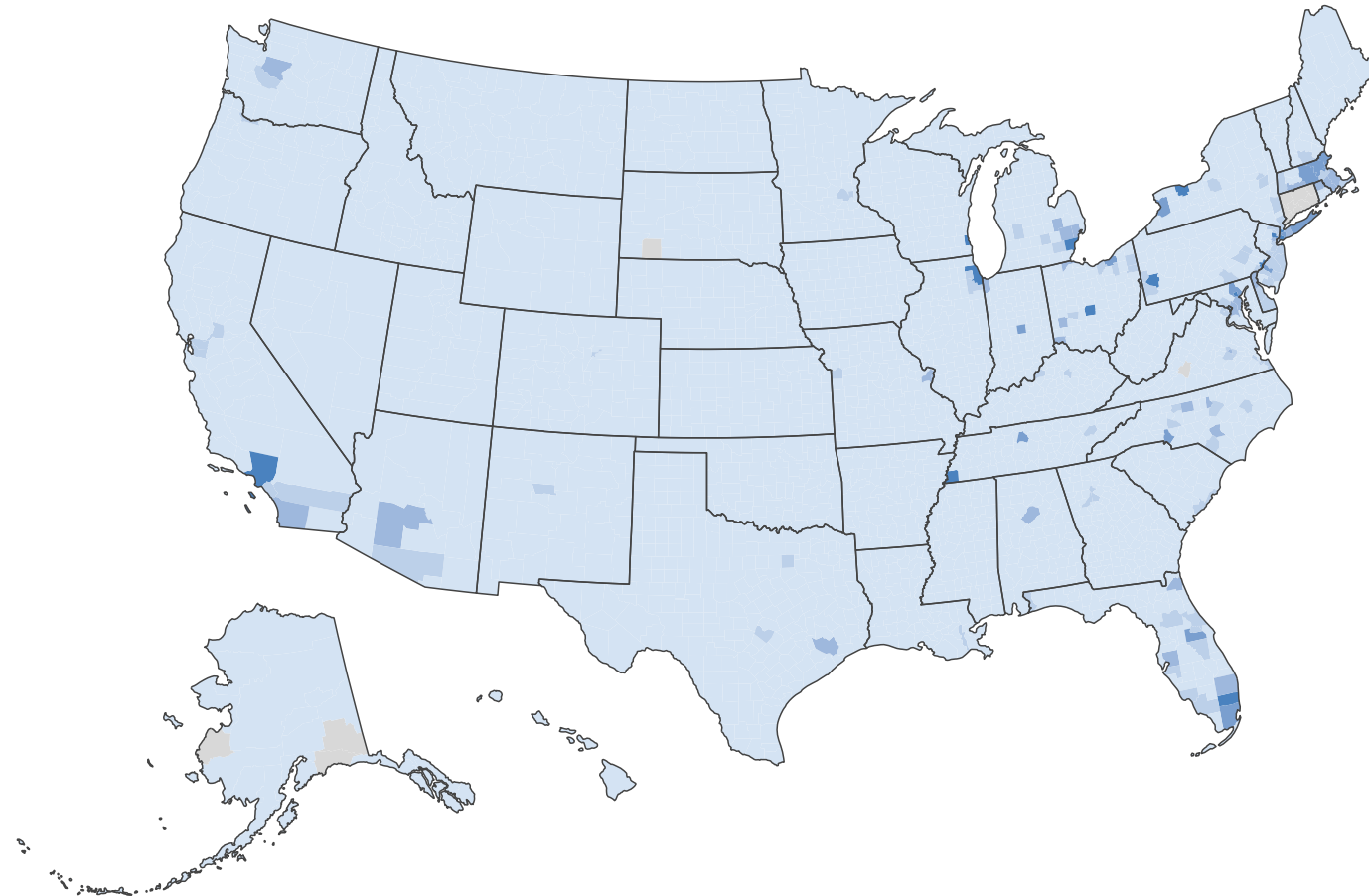


But burden is geographically distributed



Age-standardized mortality rate (per 100,000 person-years)

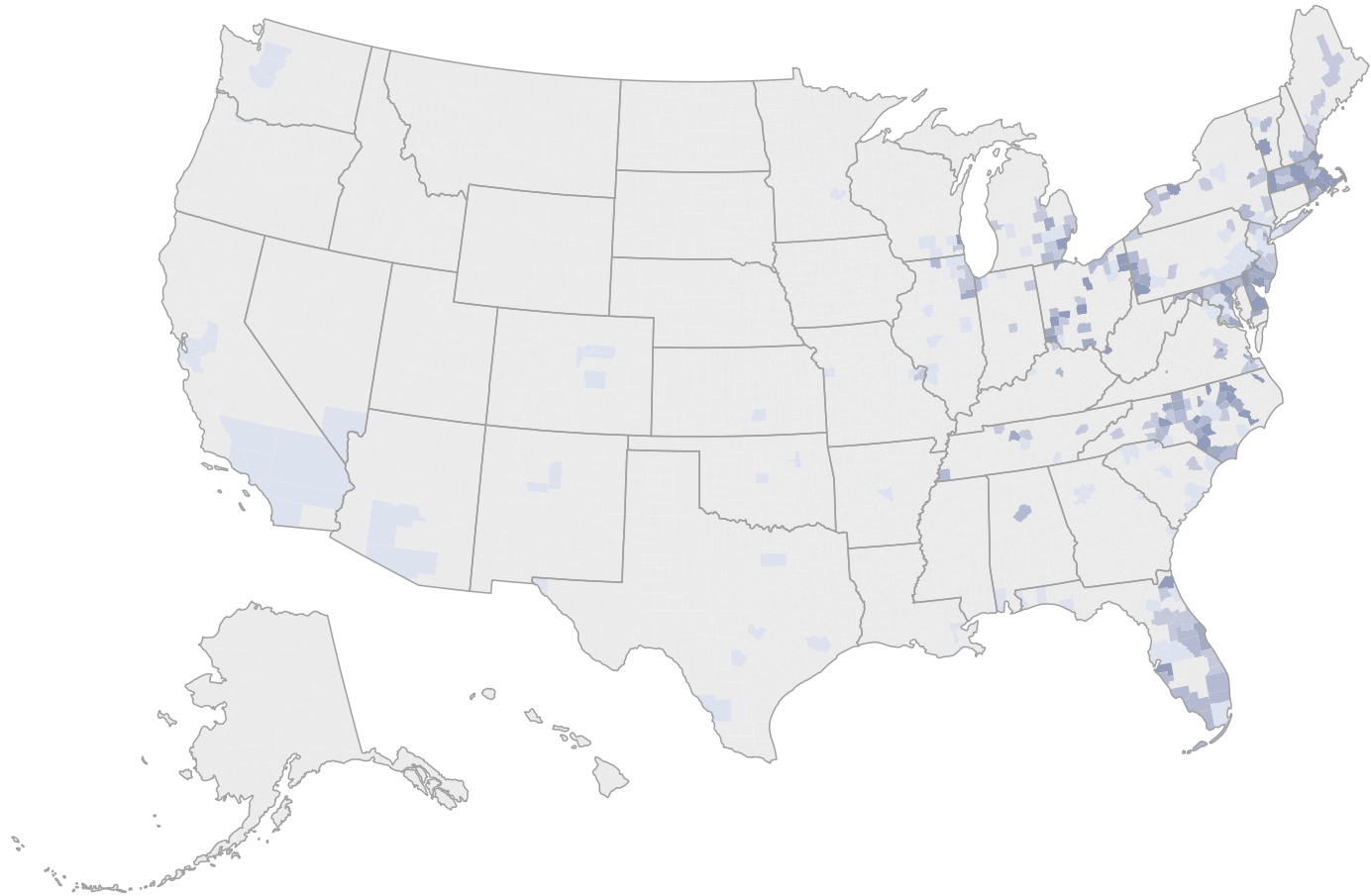
0.0 0.8 1.2 1.6 2.0 2.4



Contribution to national rate change (per 100,000)

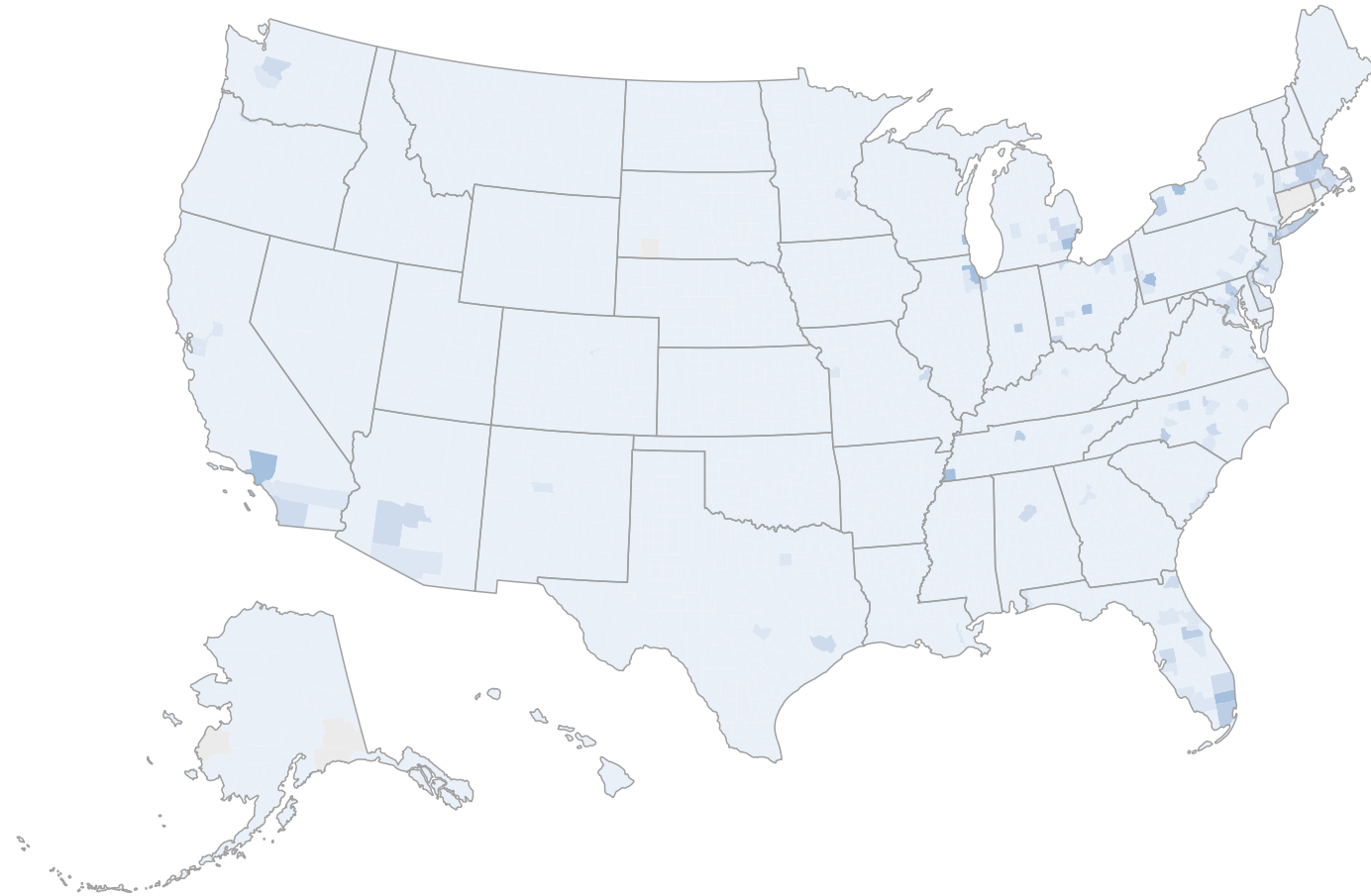
0.000 0.006 0.014 0.024 0.034 0.048

And highly concentrated



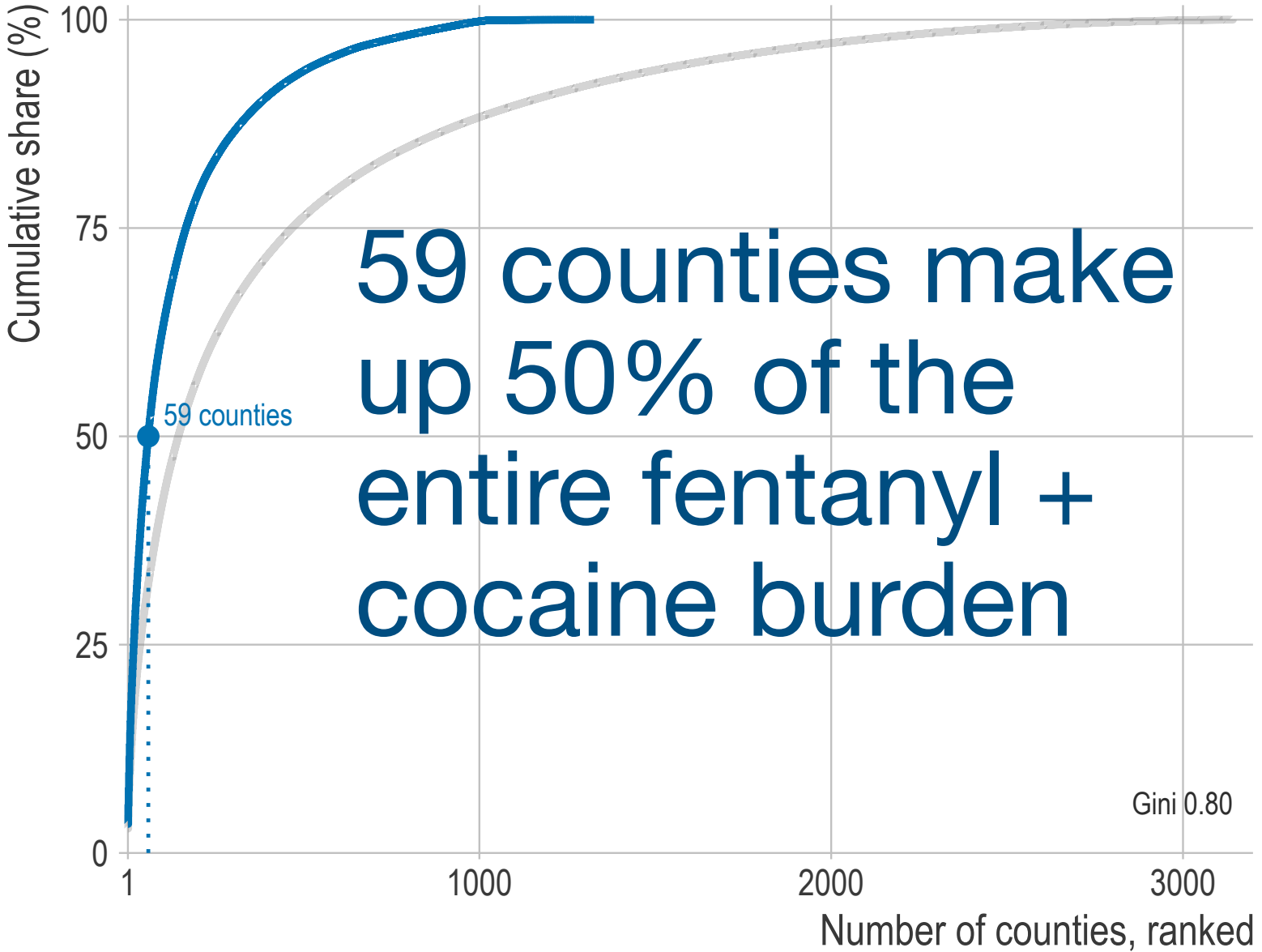
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.8 1.2 1.6 2.0 2.4

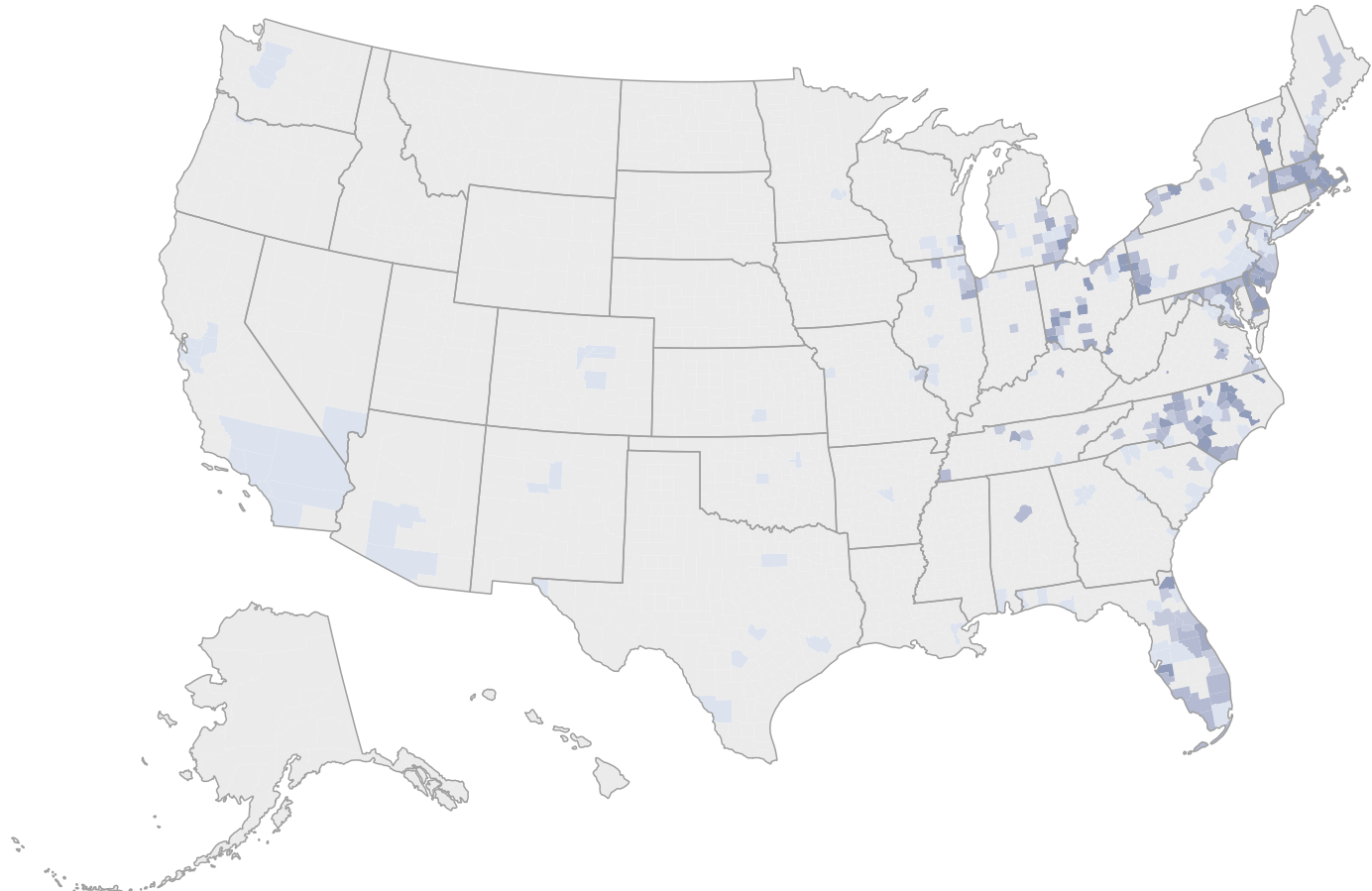


Contribution to national rate change (per 100,000)

0.000 0.006 0.014 0.024 0.034 0.048

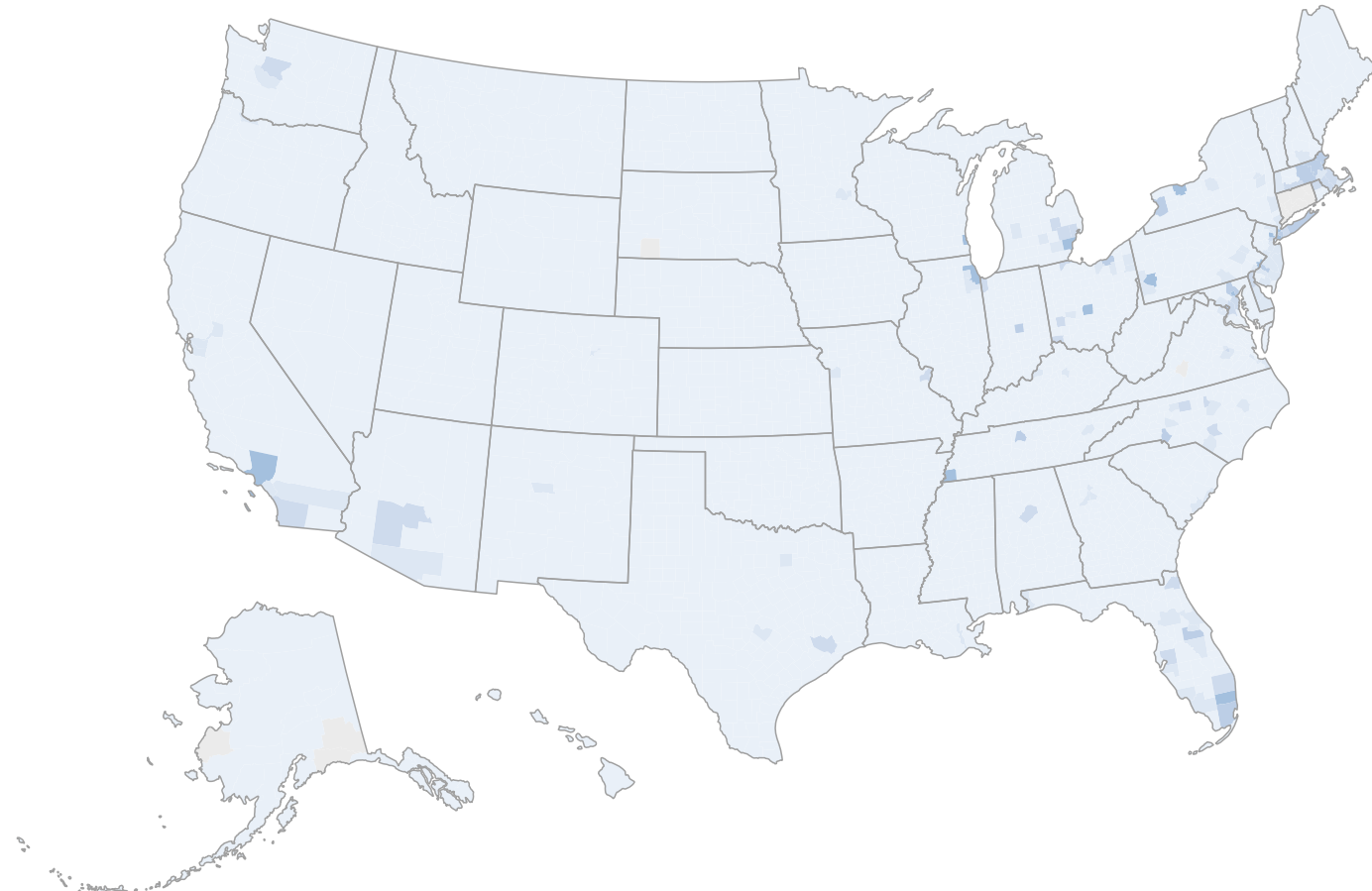


Methamphetamine + fentanyl burden



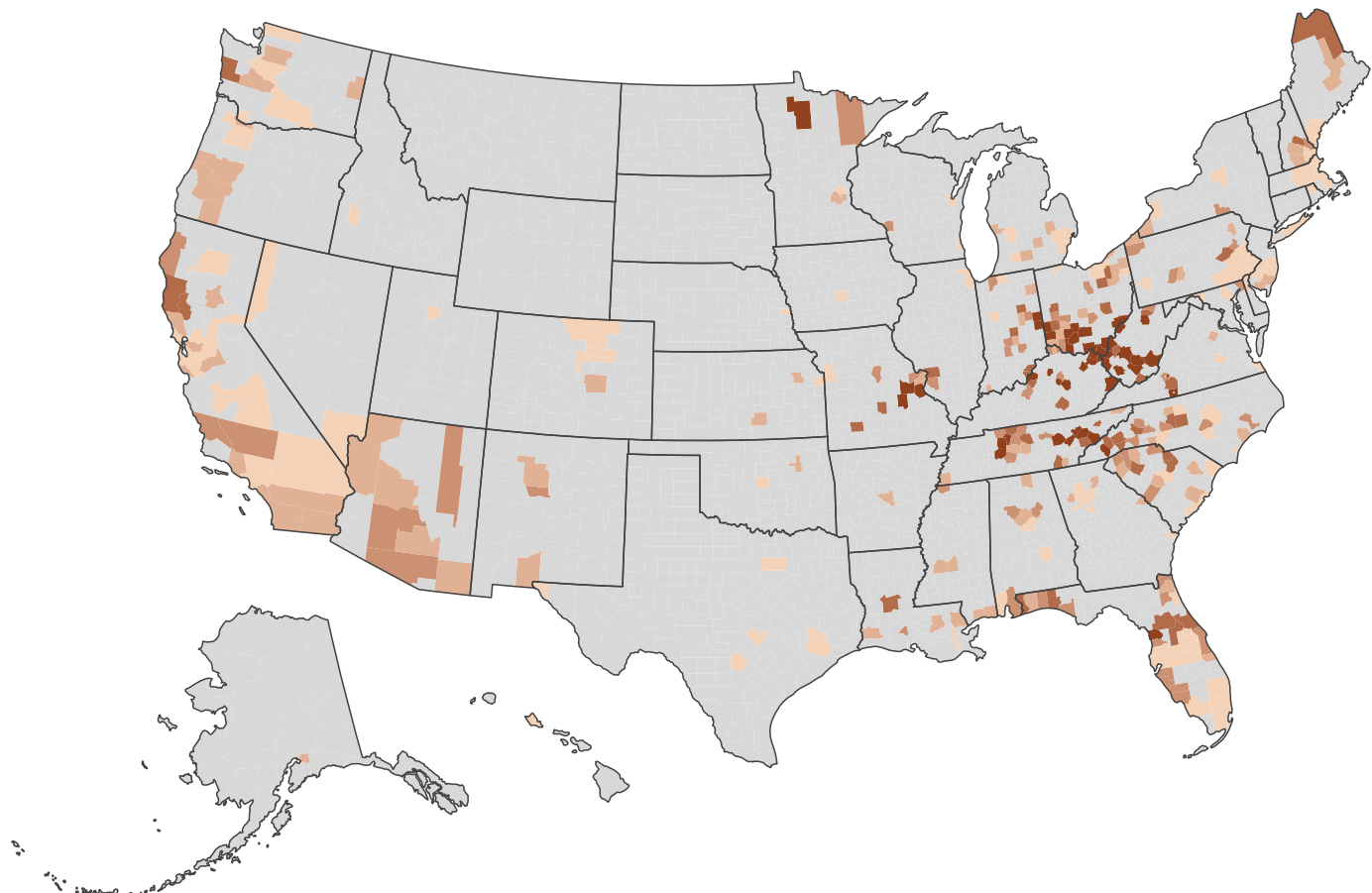
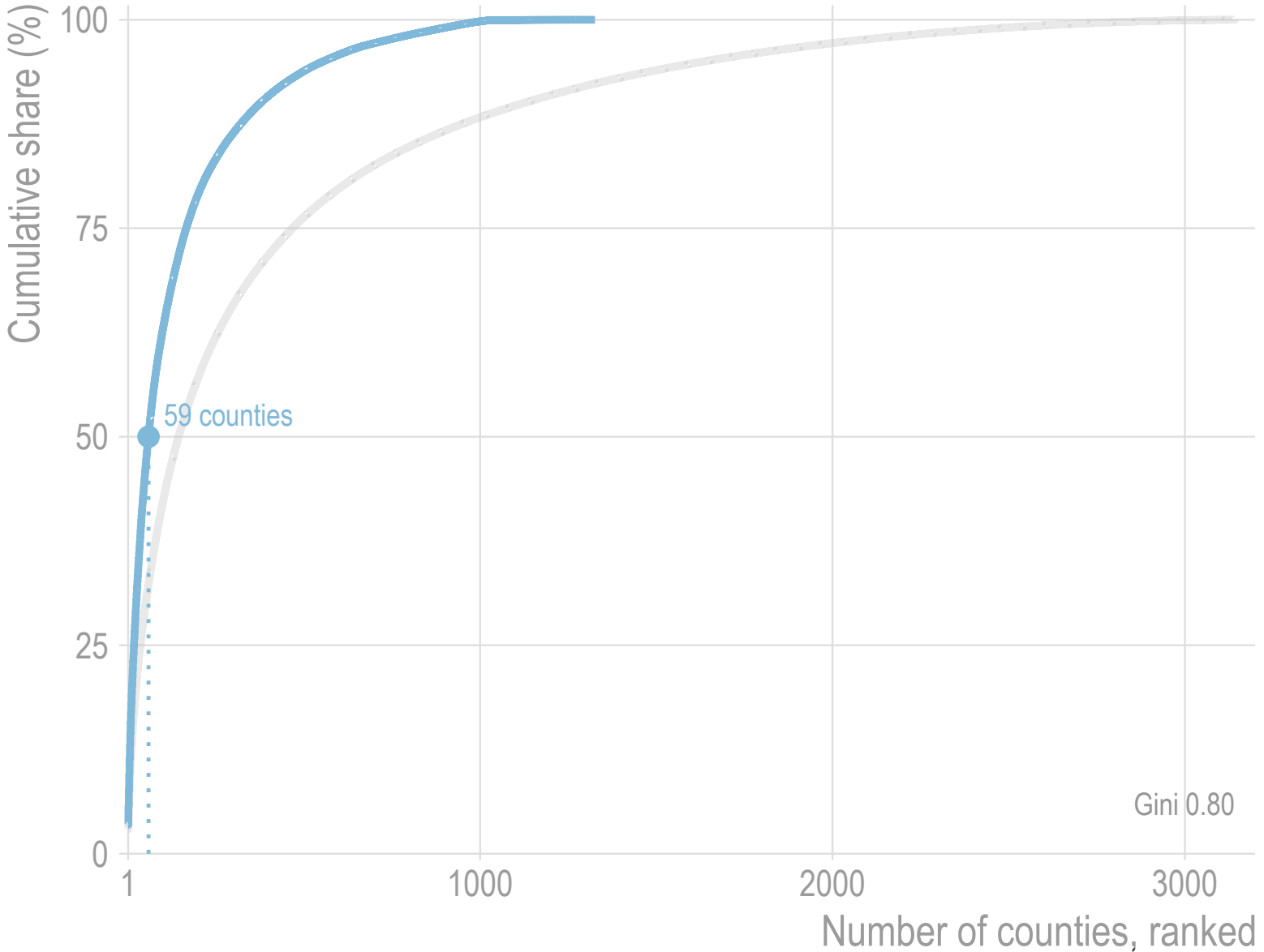
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.8 1.2 1.6 2.0 2.4



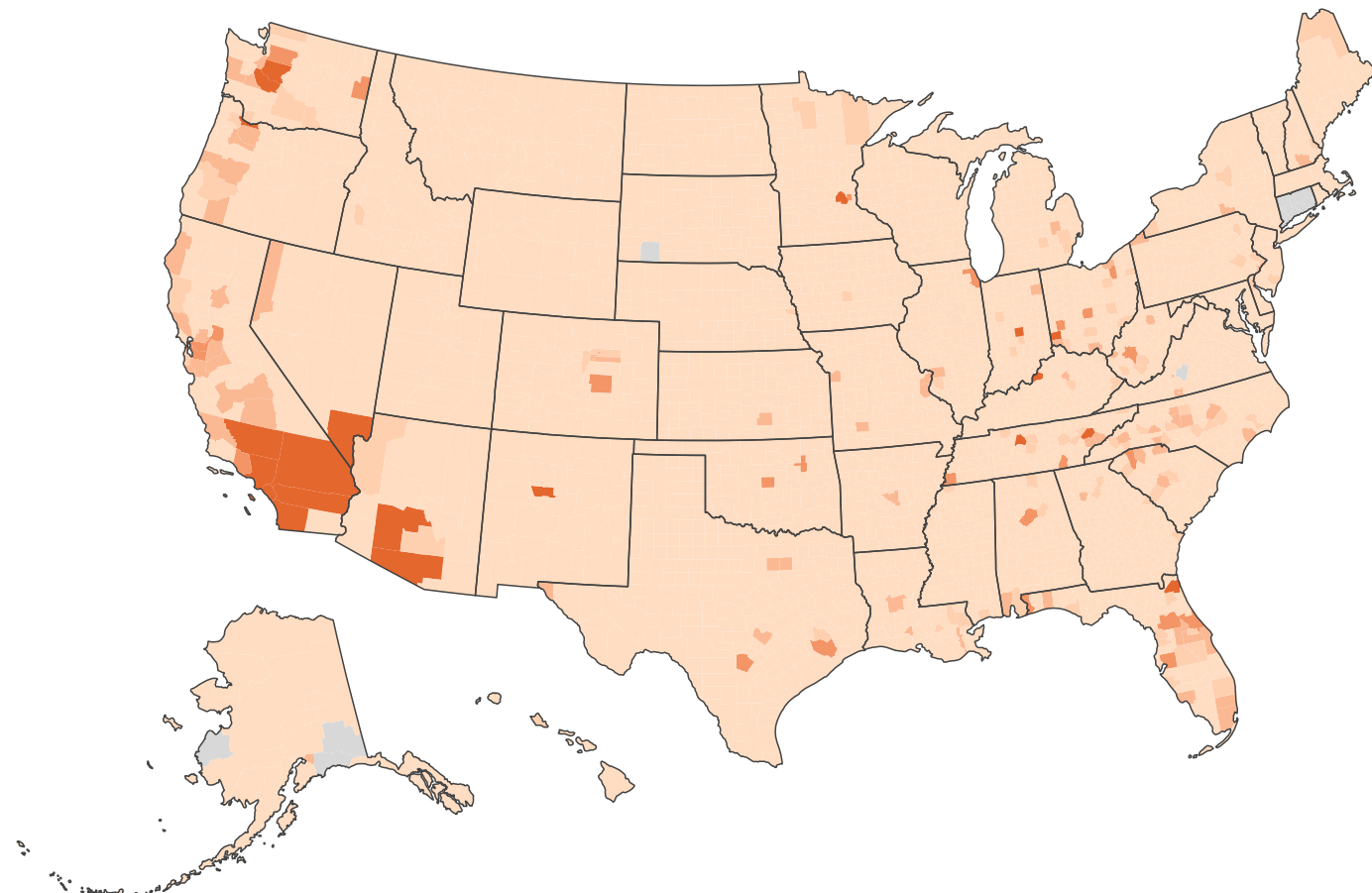
Contribution to national rate change (per 100,000)

0.000 0.006 0.014 0.024 0.034 0.048



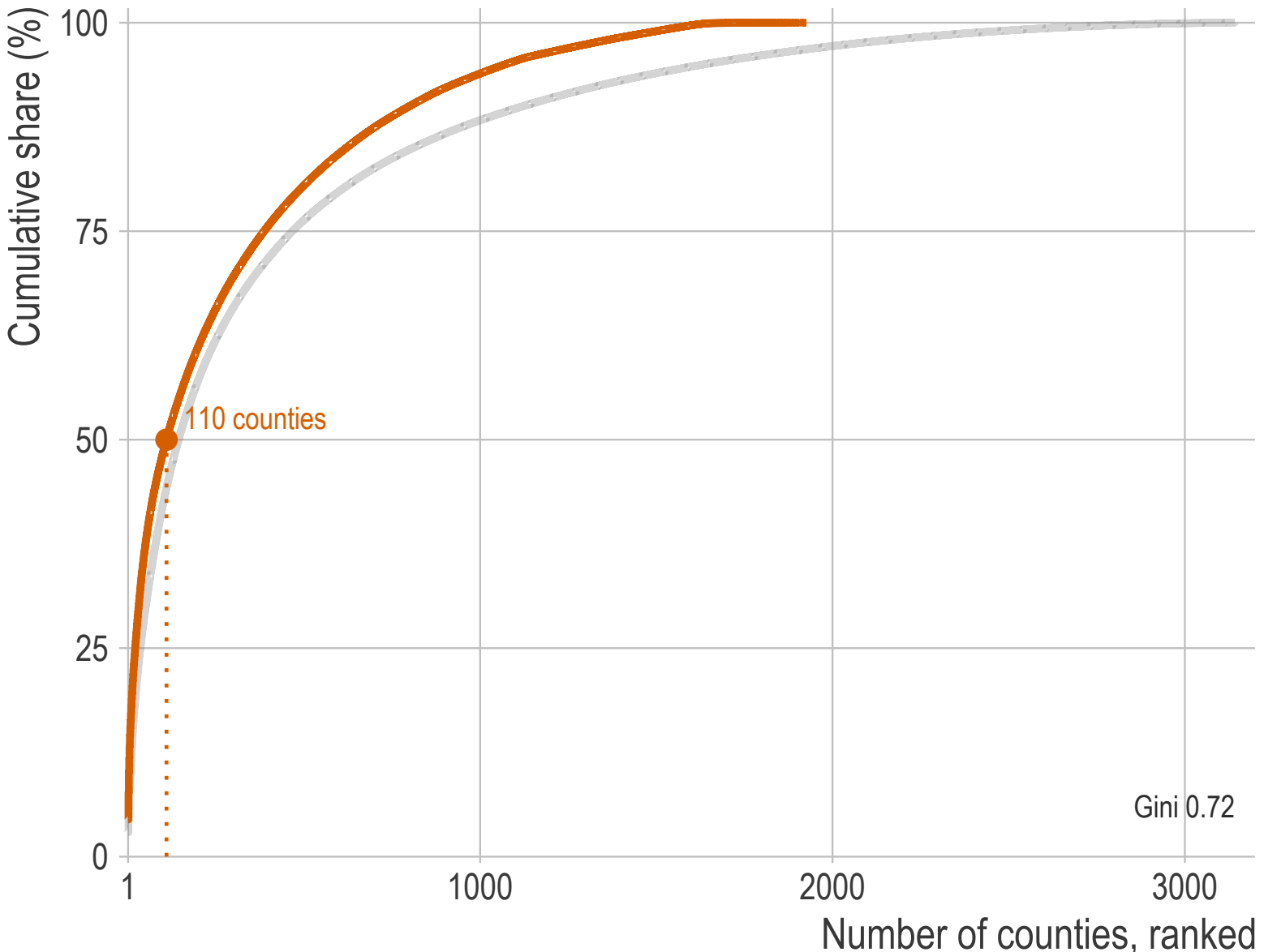
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.6 1.0 1.6 2.2 3.0

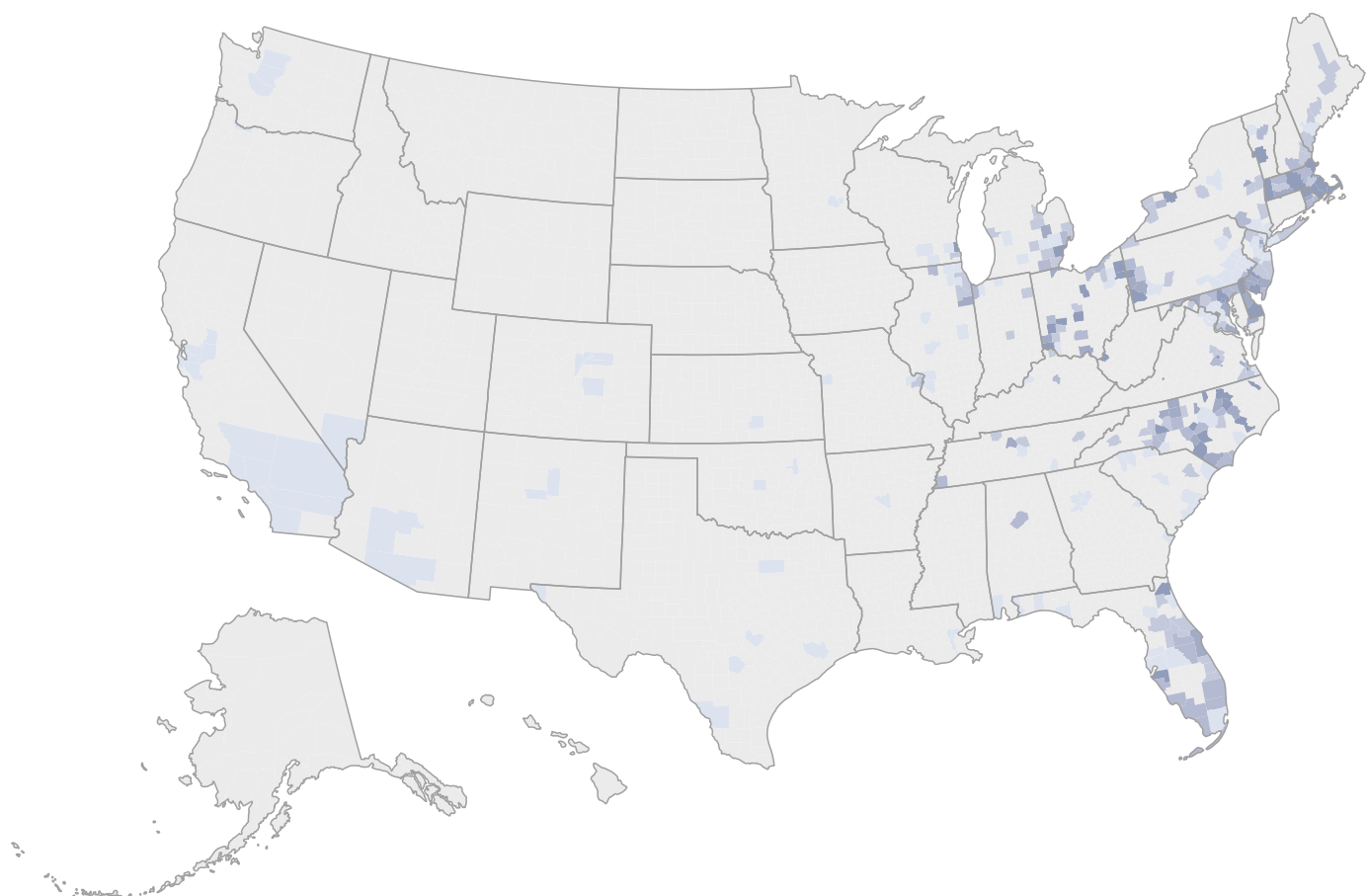


Contribution to national rate change (per 100,000)

0.000 0.004 0.006 0.014 0.022 0.034

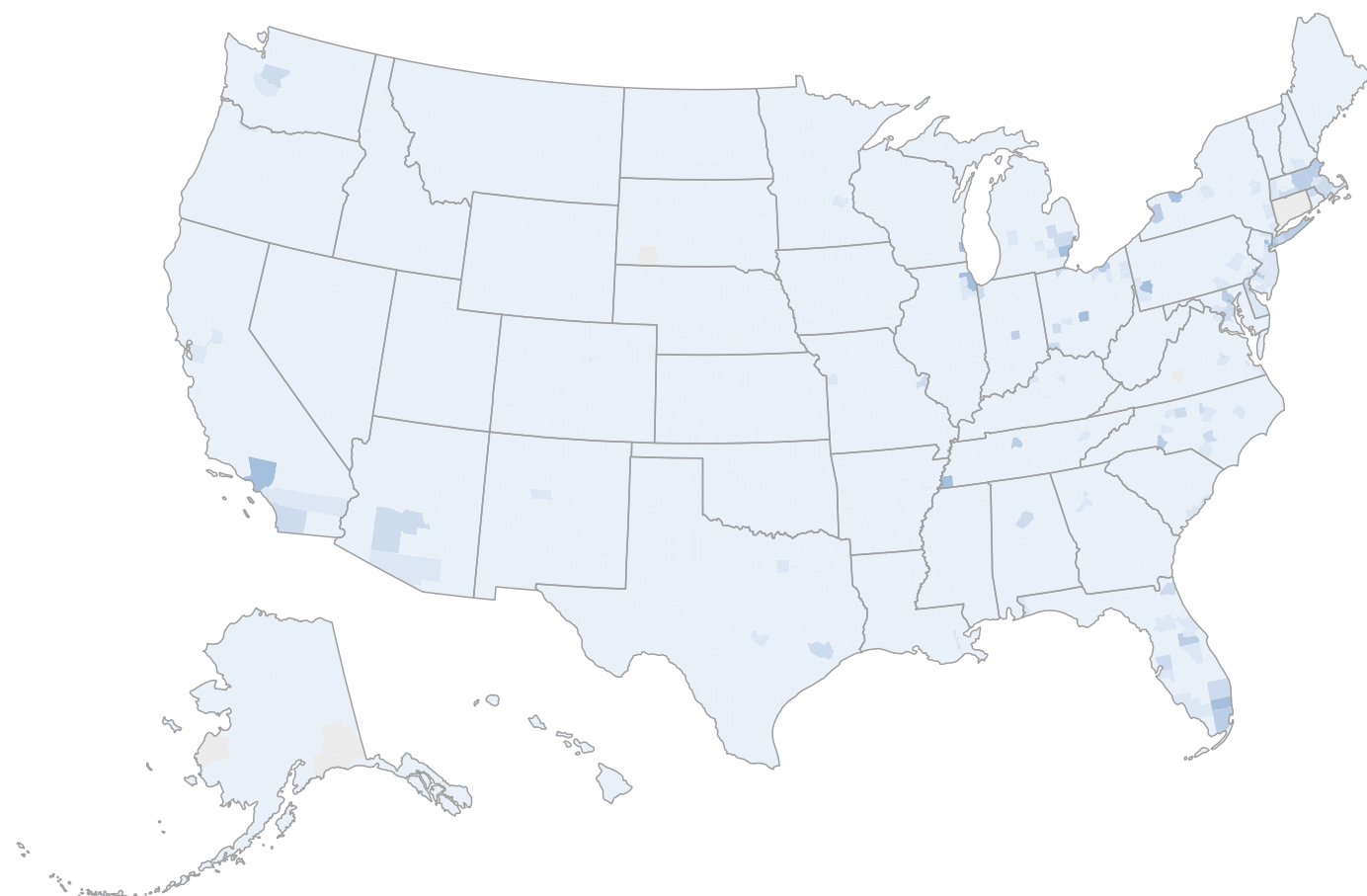


Reversed — rates in east but burden in west



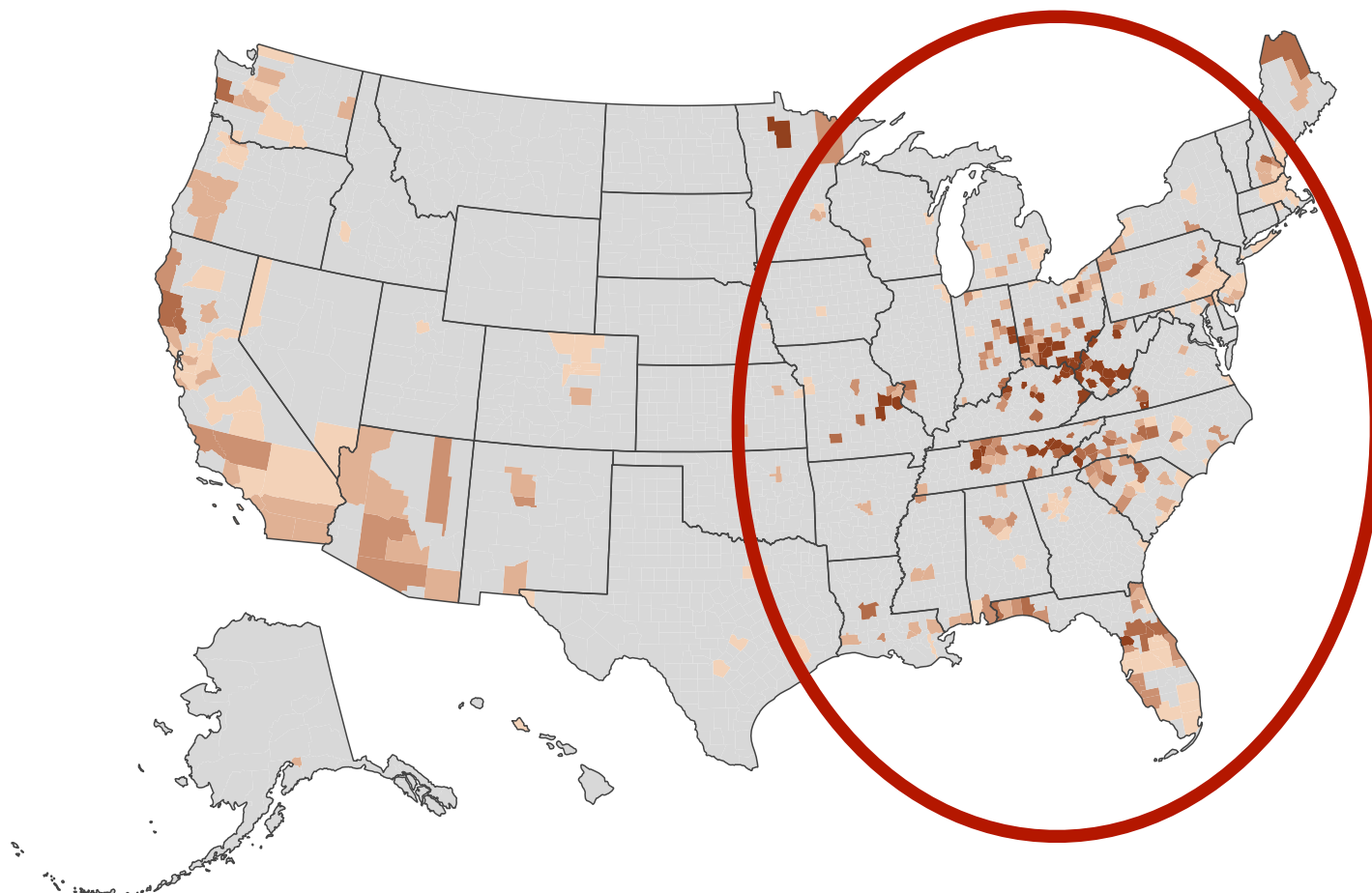
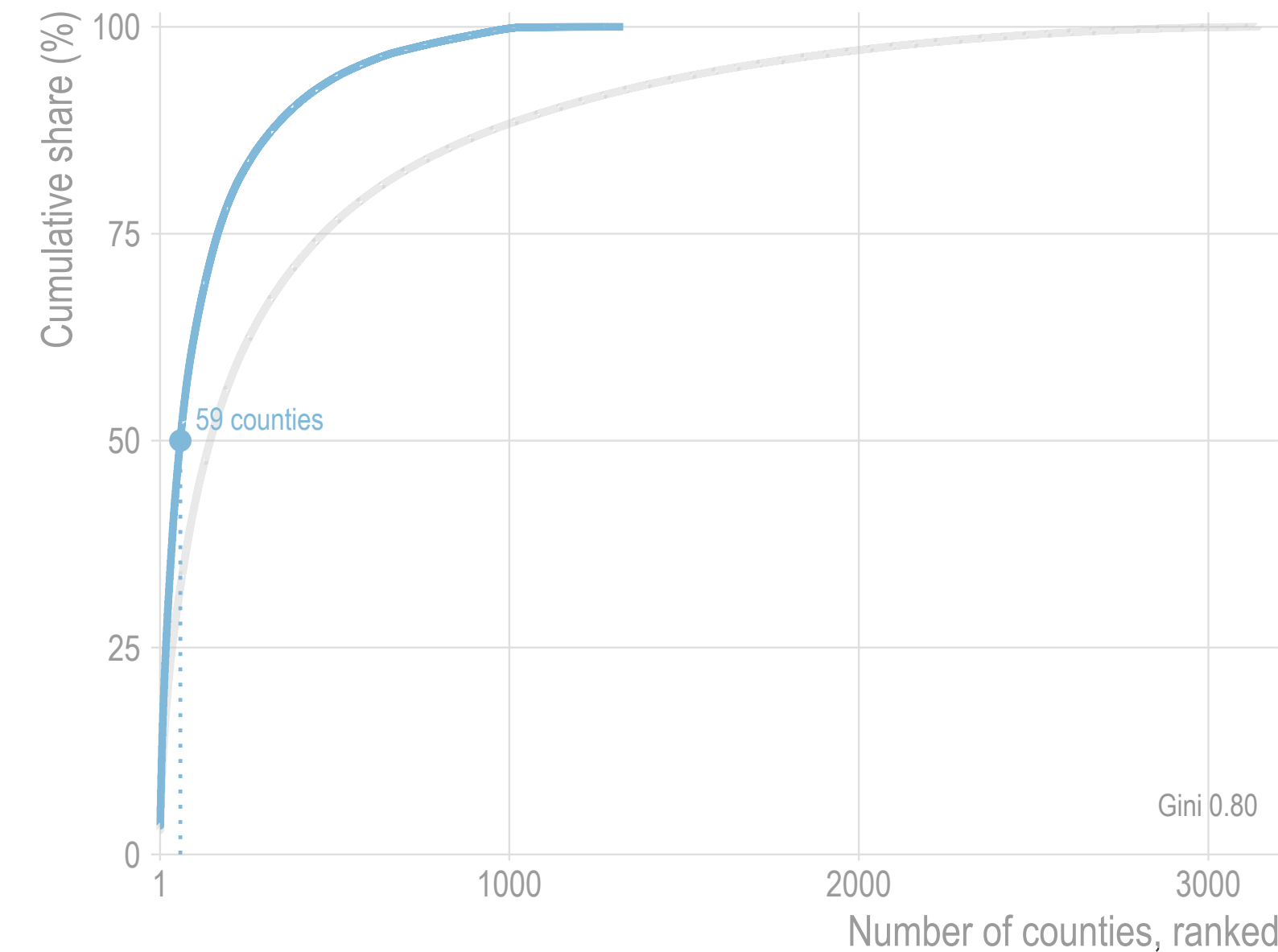
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.8 1.2 1.6 2.0 2.4



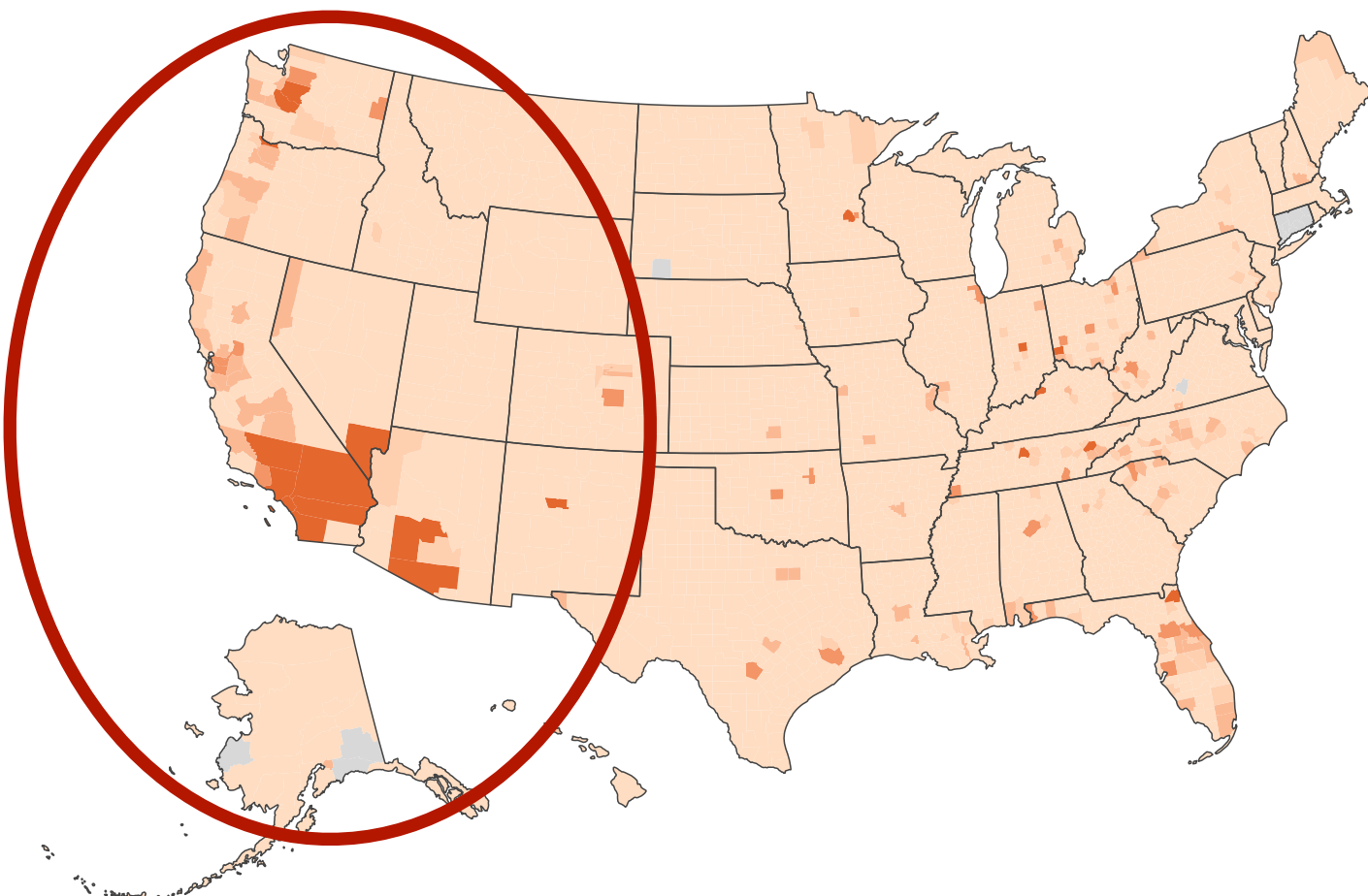
Contribution to national rate change (per 100,000)

0.000 0.006 0.014 0.024 0.034 0.048



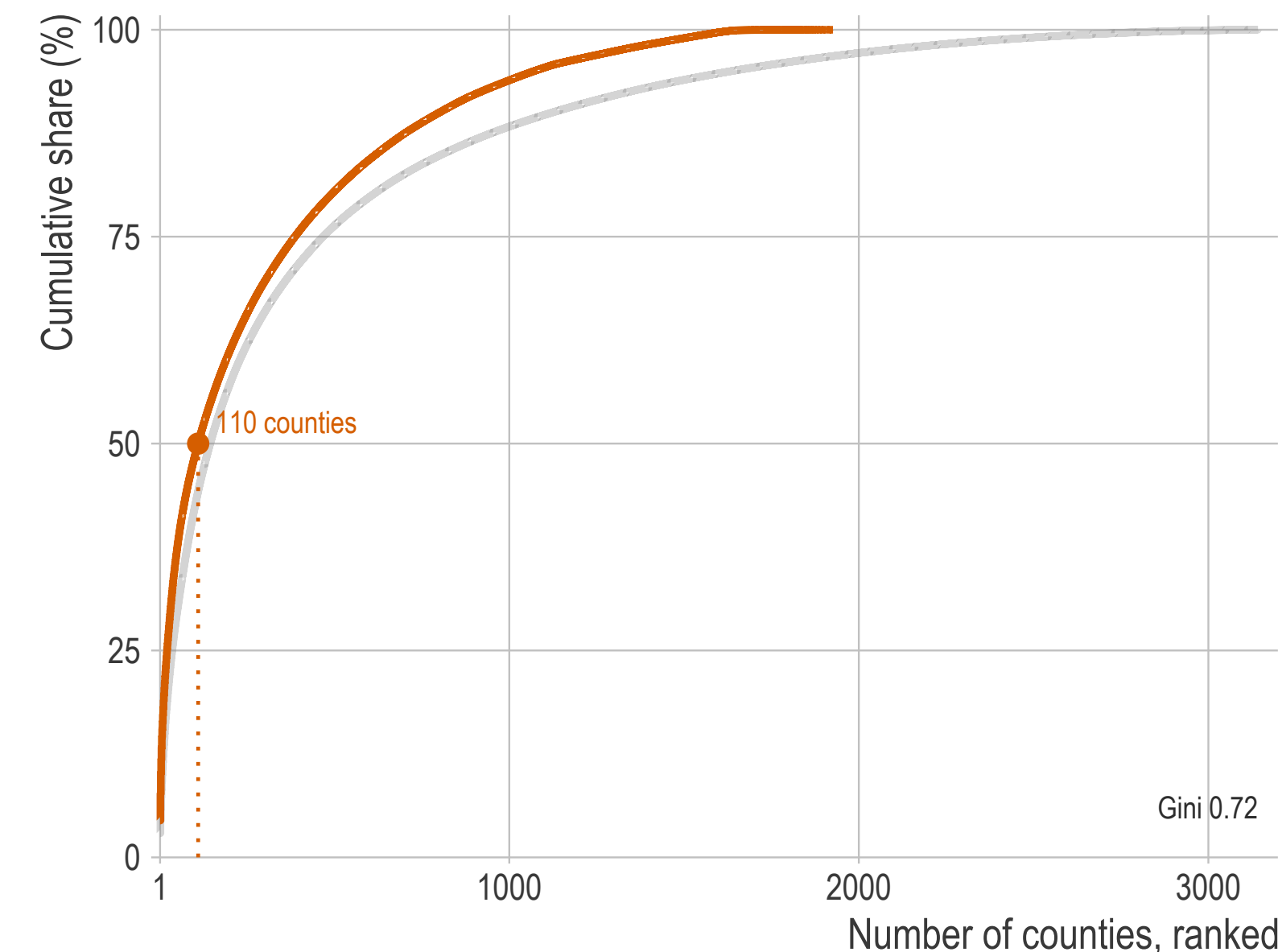
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.6 1.0 1.6 2.2 3.0

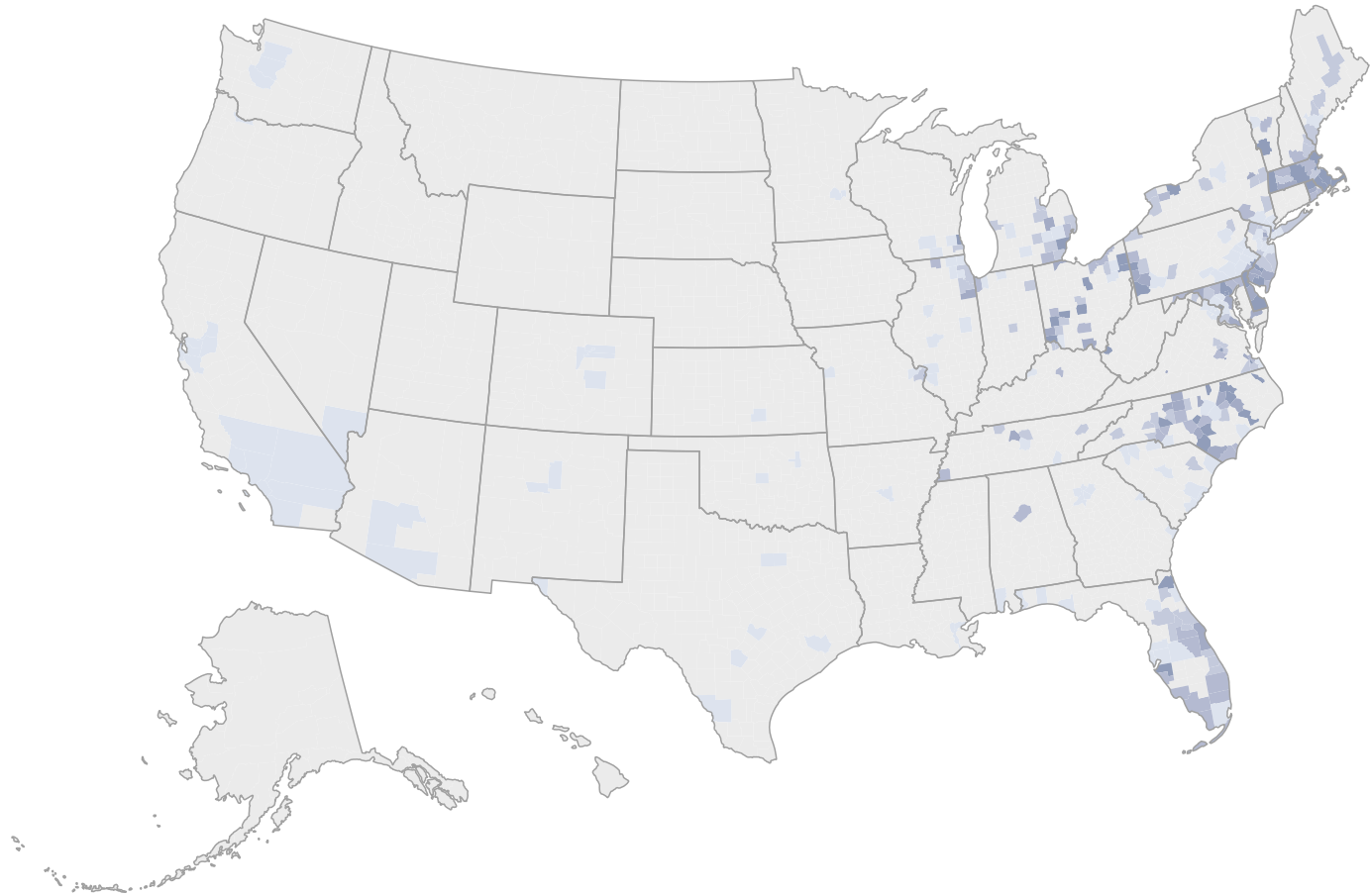


Contribution to national rate change (per 100,000)

0.000 0.004 0.006 0.014 0.022 0.034

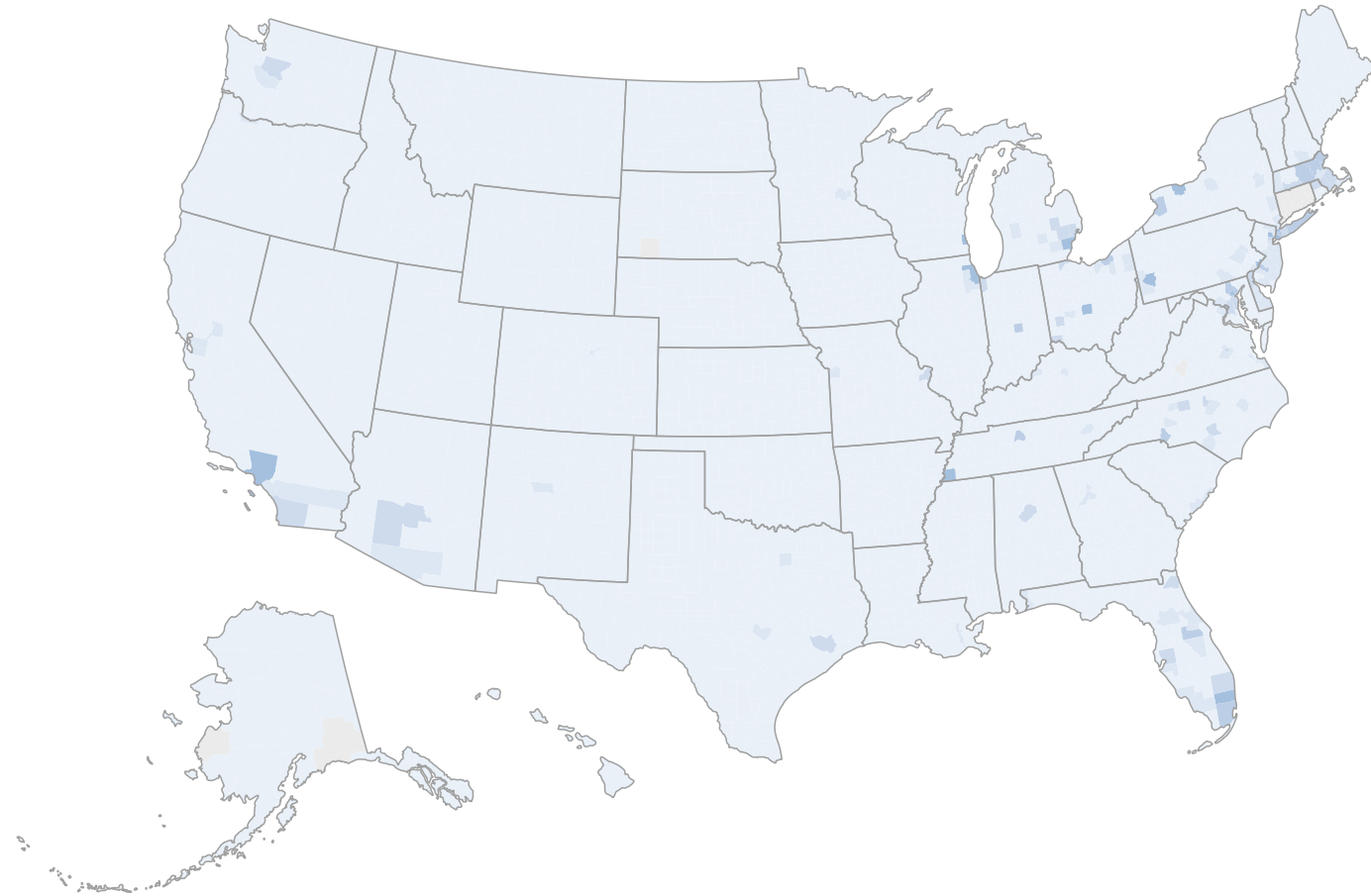


Burden is less concentrated



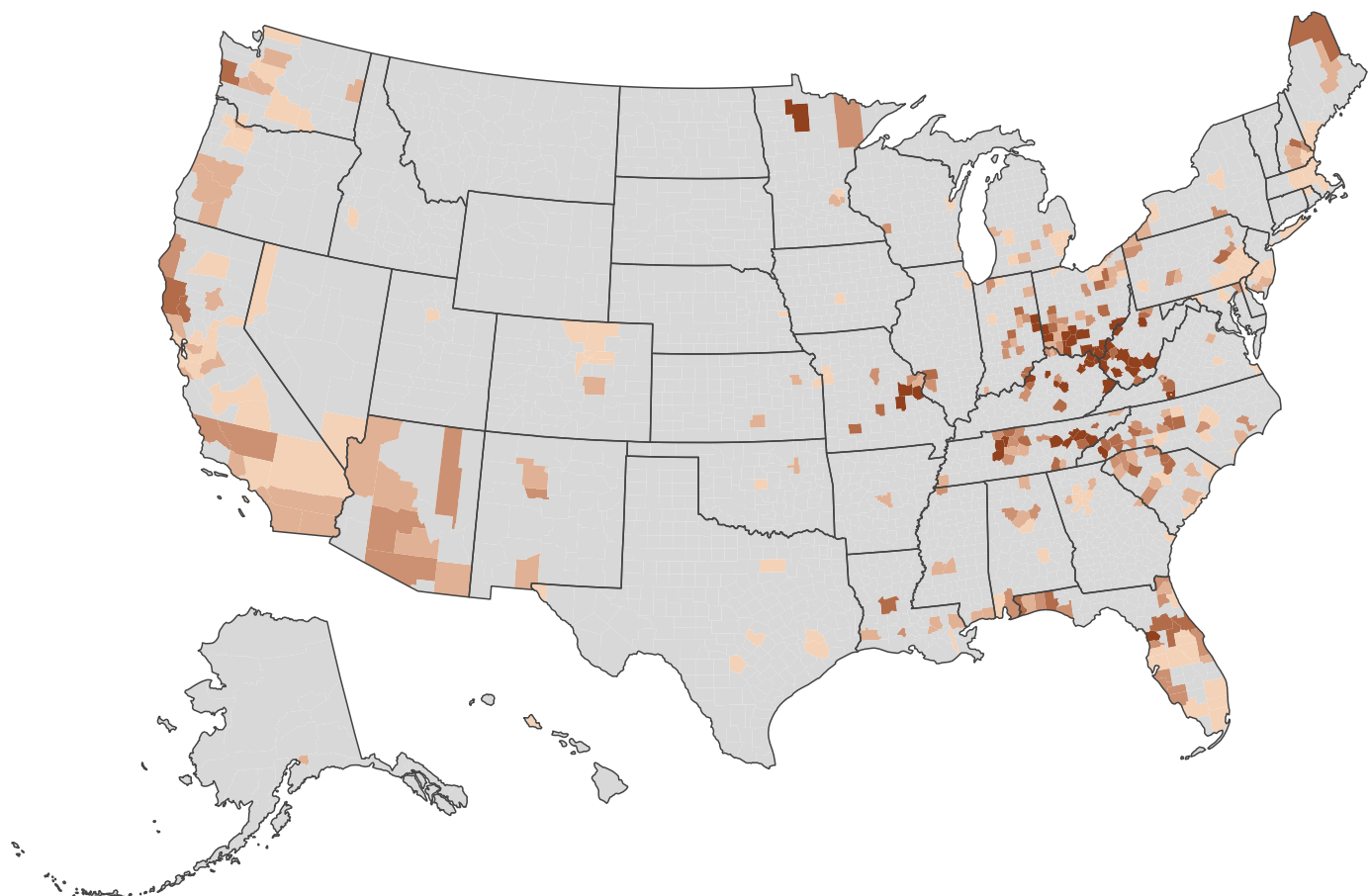
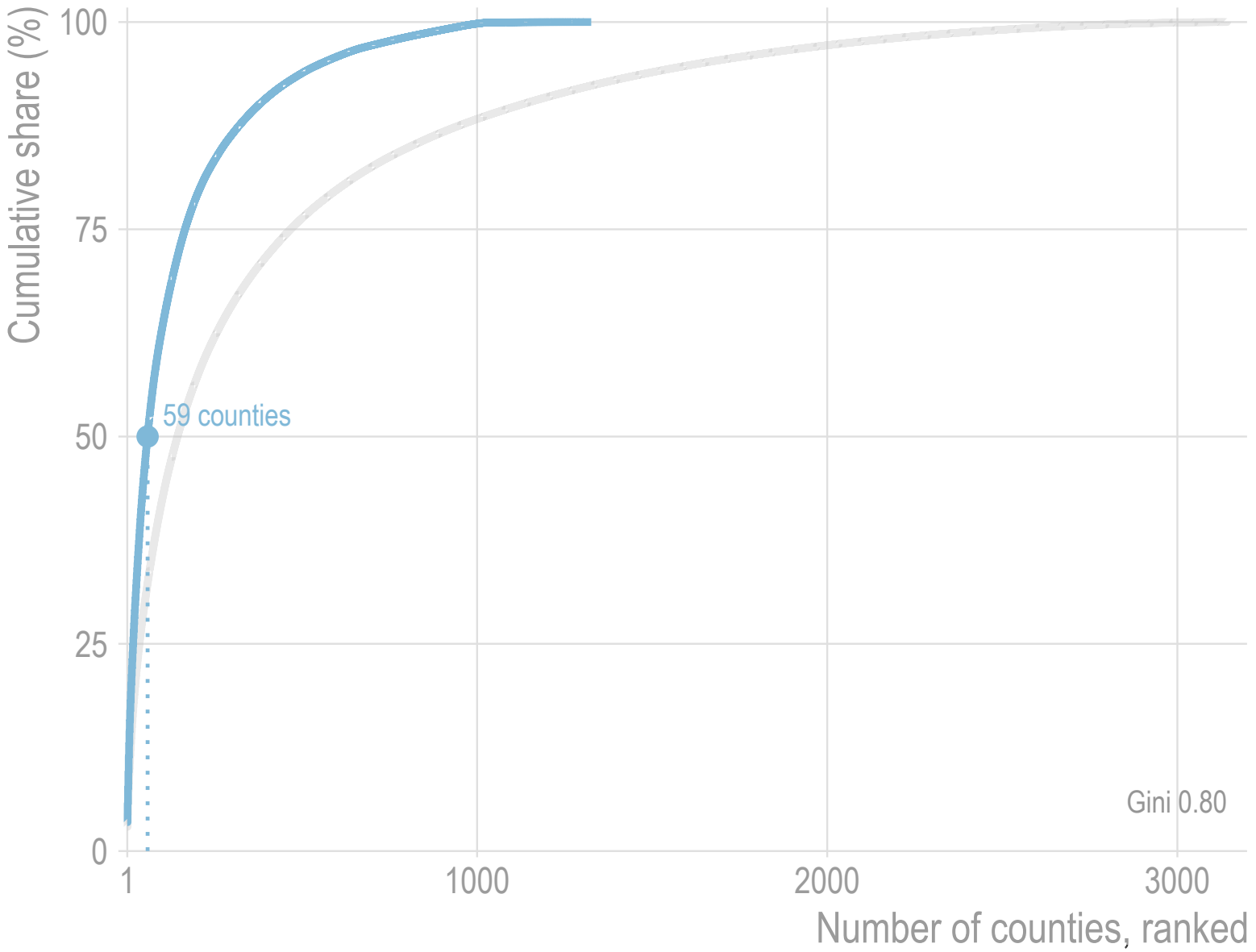
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.8 1.2 1.6 2.0 2.4



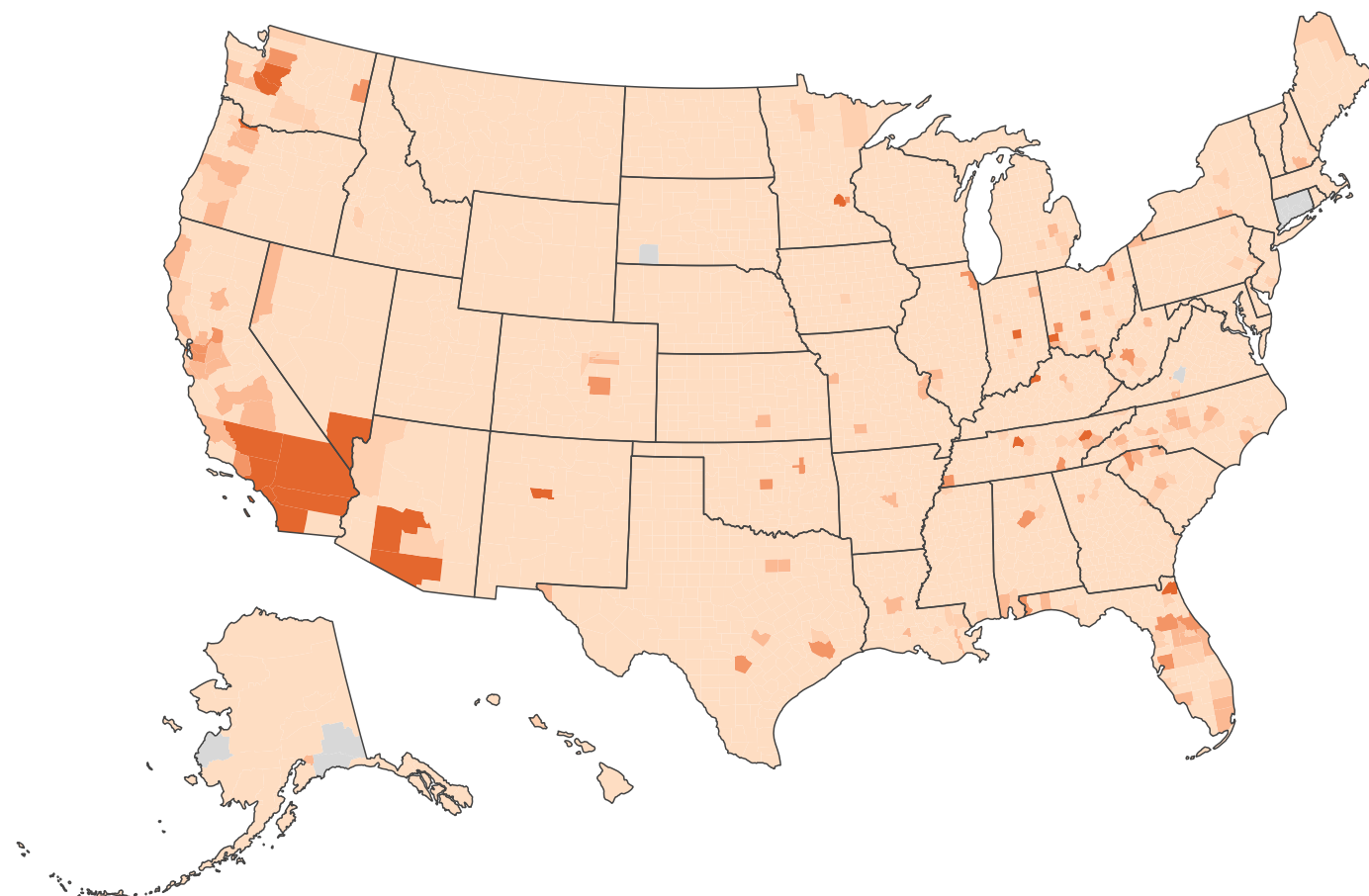
Contribution to national rate change (per 100,000)

0.000 0.006 0.014 0.024 0.034 0.048



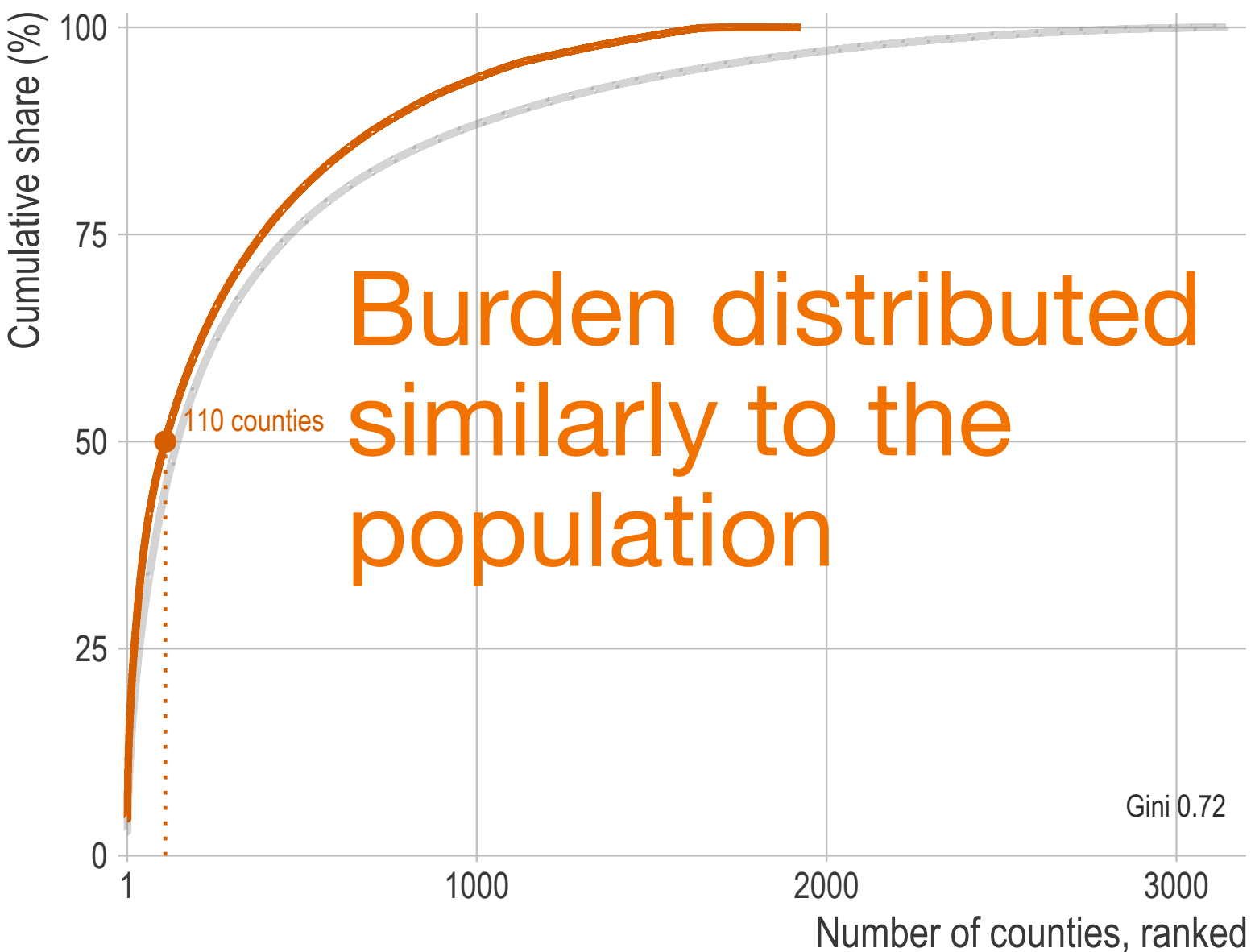
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.6 1.0 1.6 2.2 3.0



Contribution to national rate change (per 100,000)

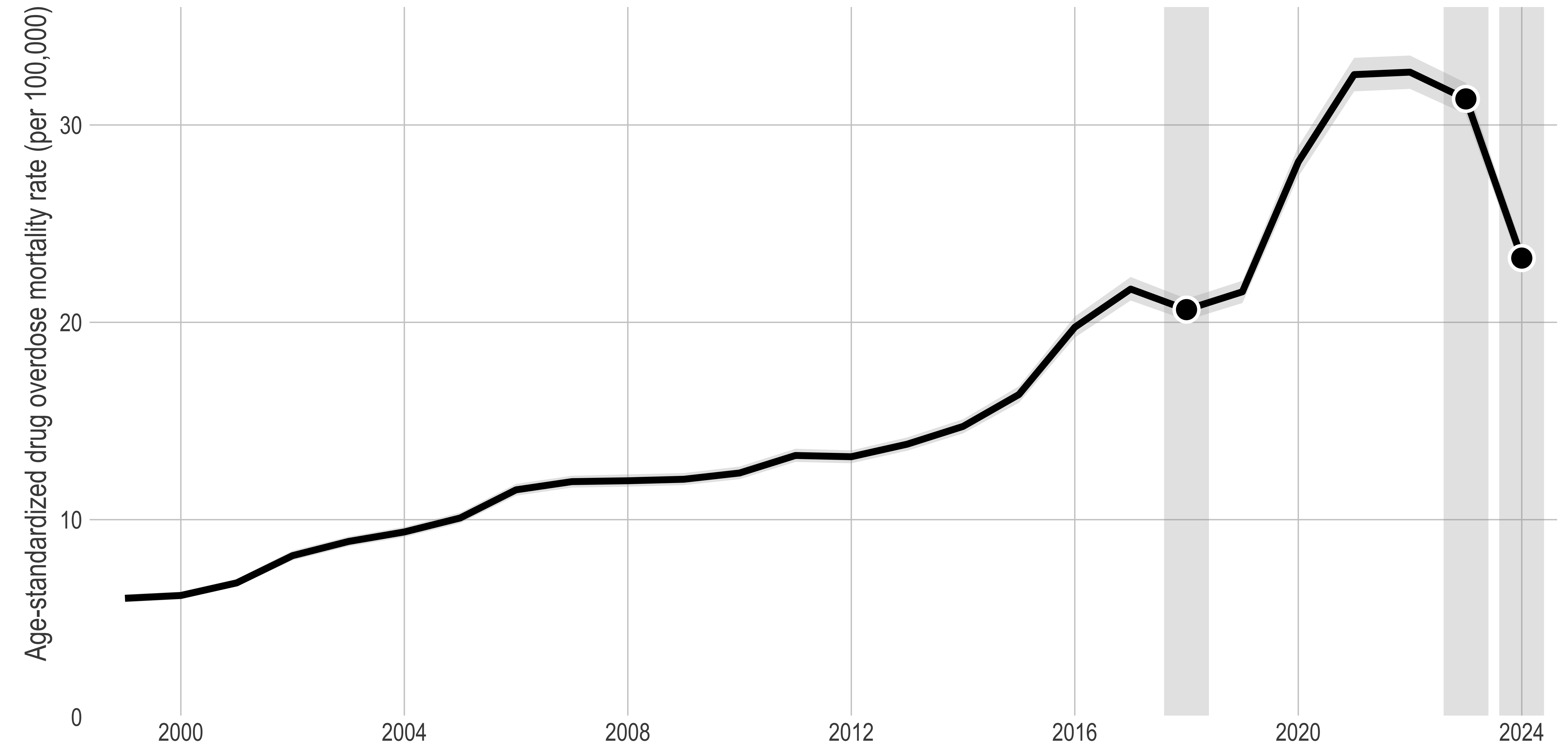
0.000 0.004 0.006 0.014 0.022 0.034



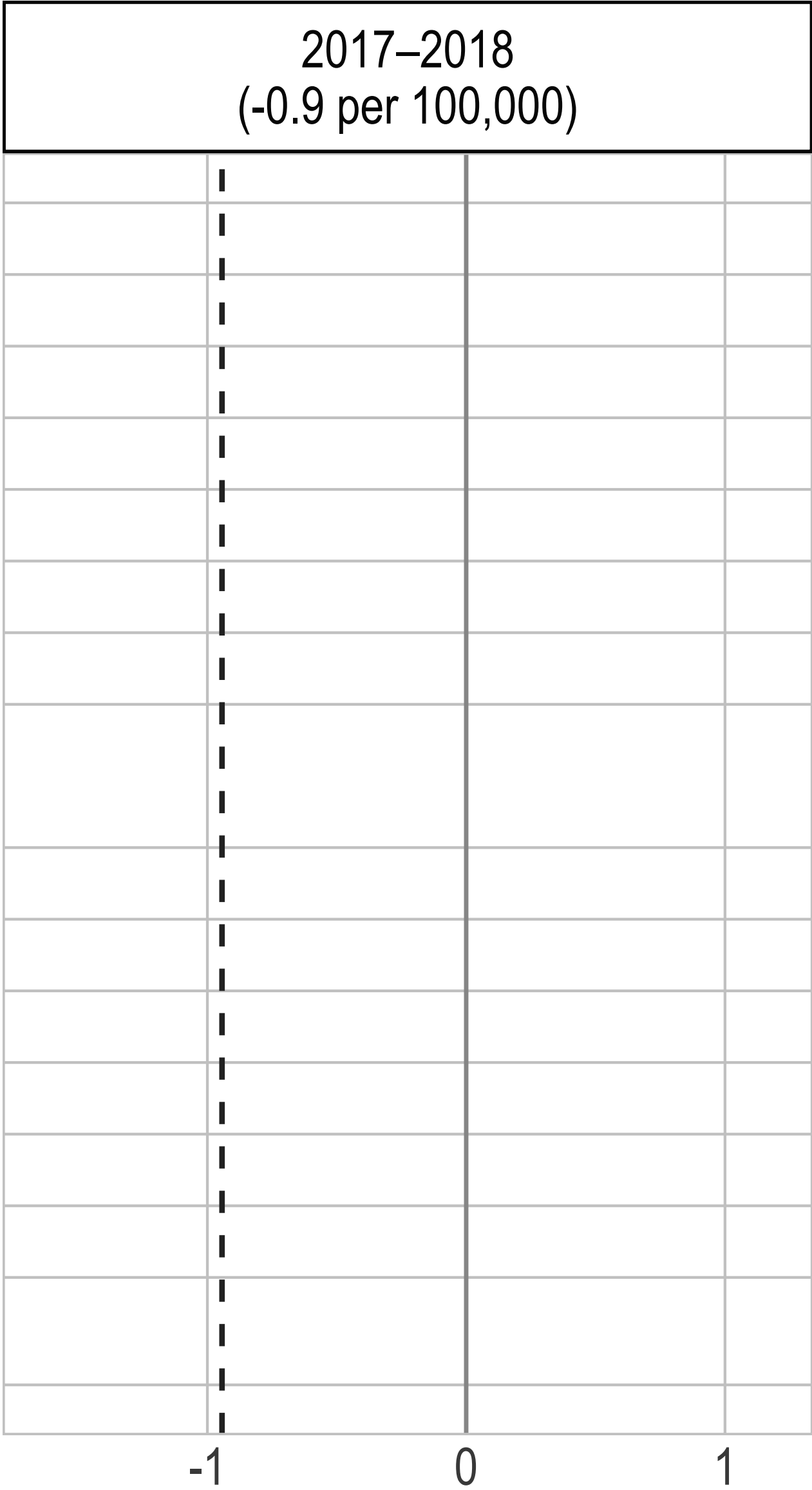
Results:

The declines

Three declines over 26 year period

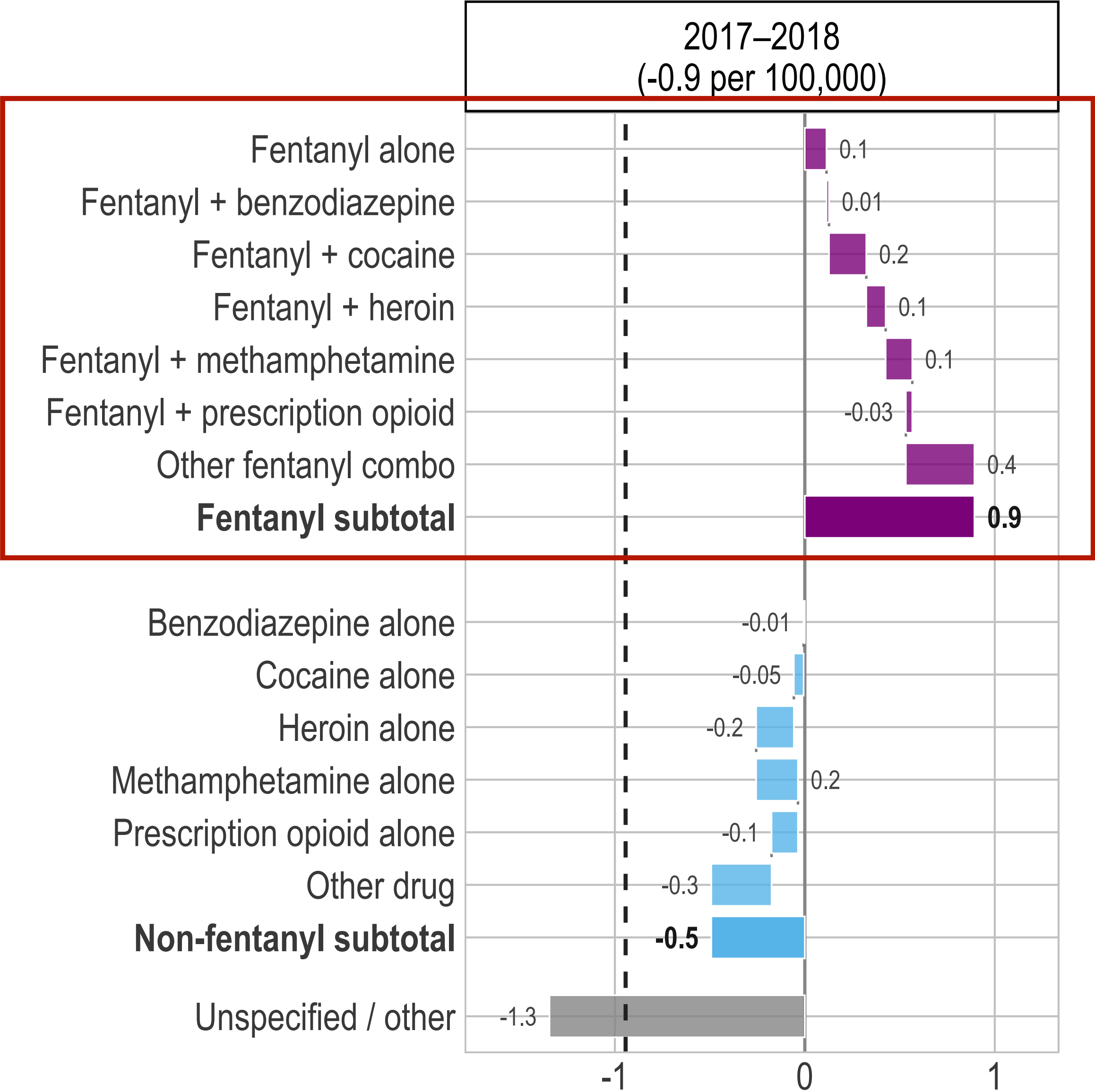


Drop of ~1 per 100,000 in 2018



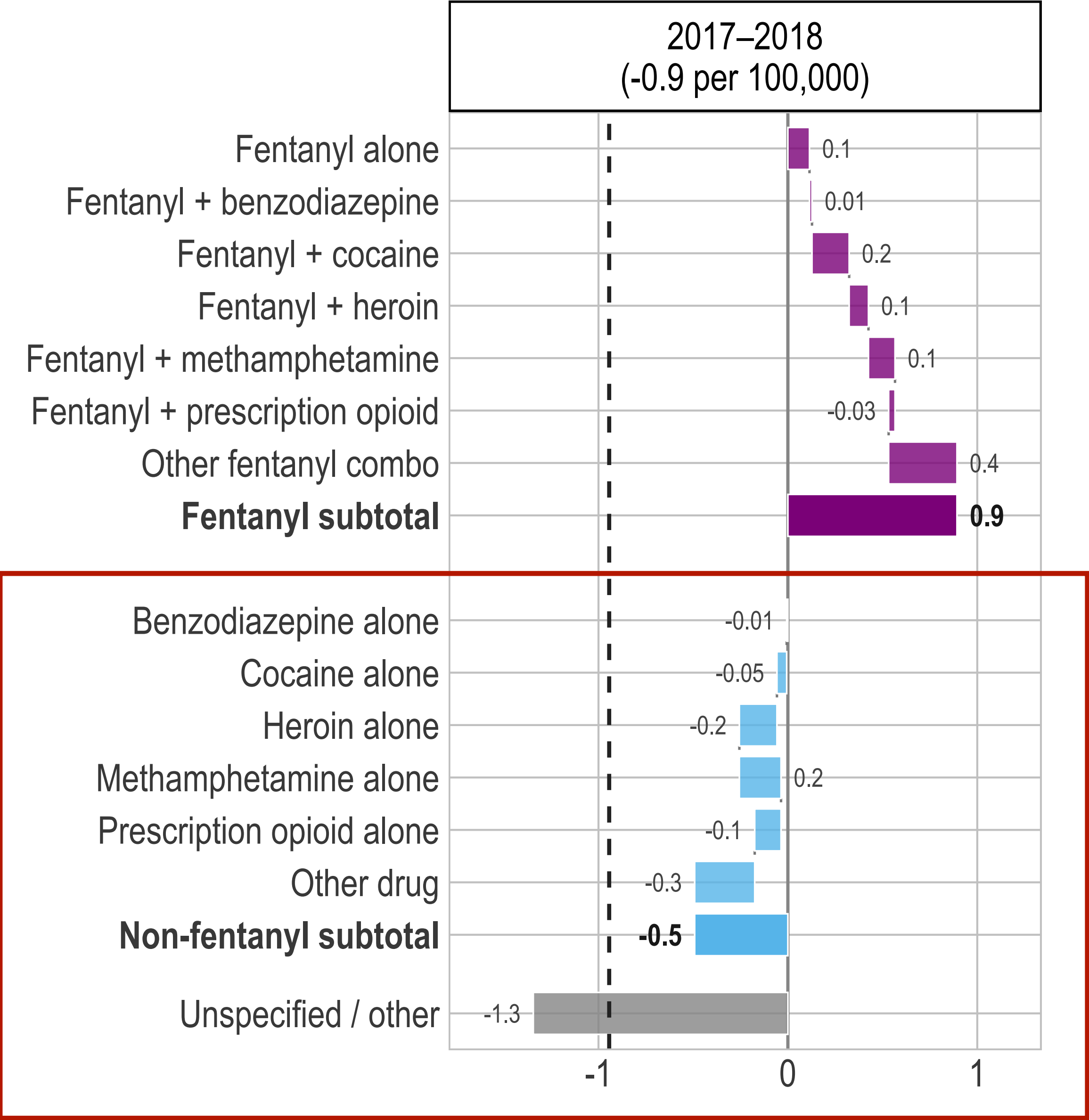
Contribution to the decline (deaths per 100,000)

Fentanyl was *increasing* during this time



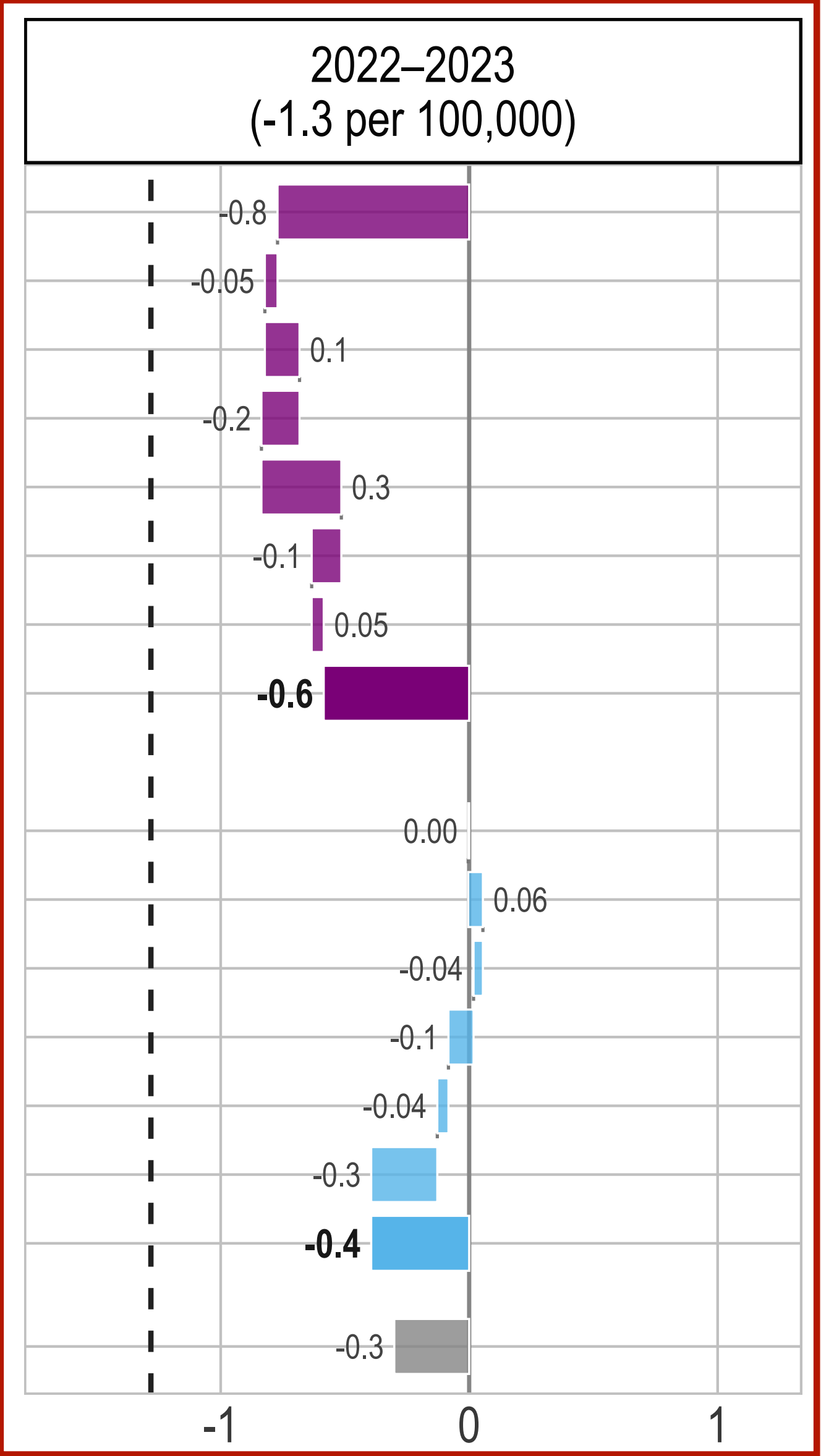
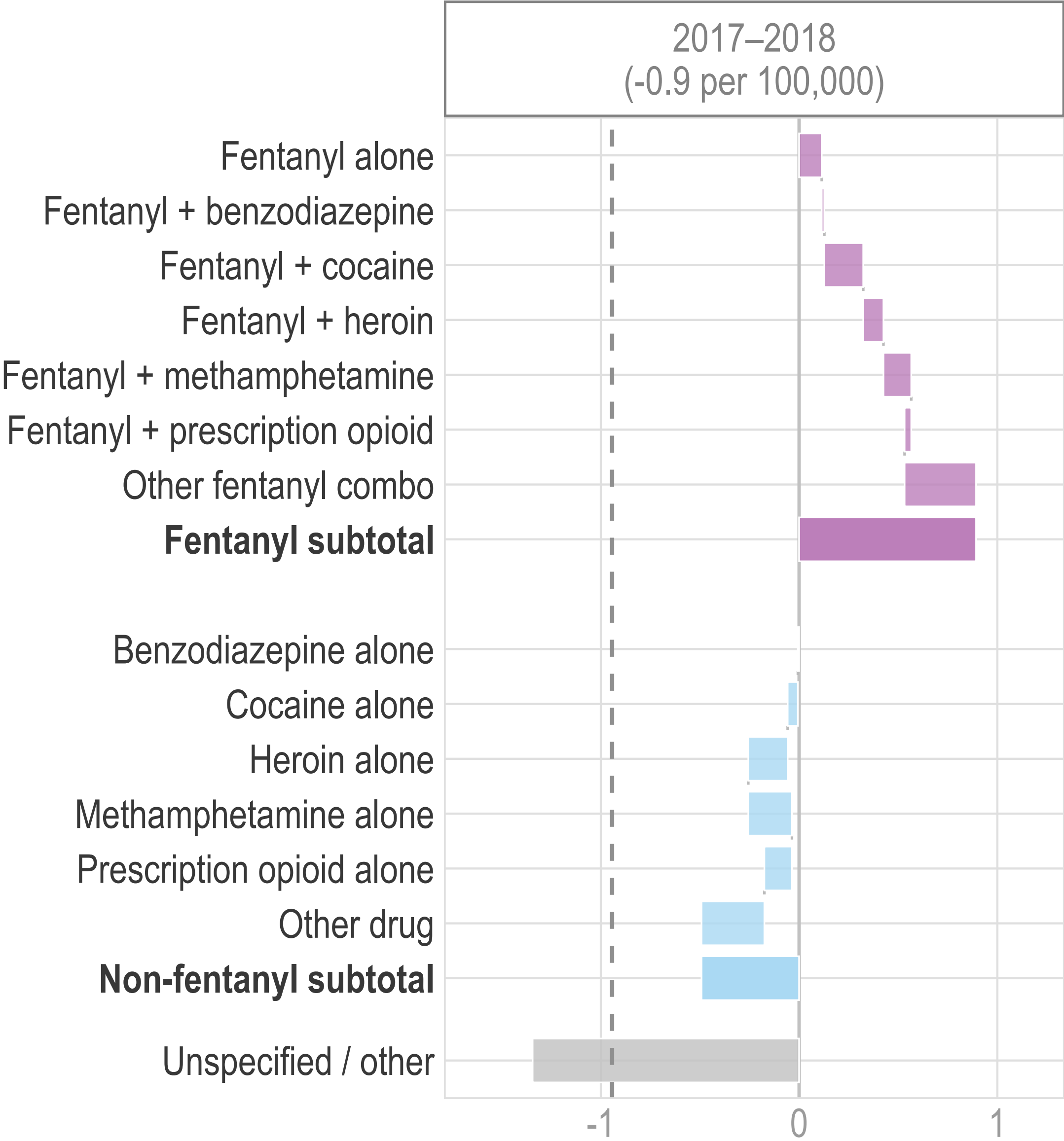
Contribution to the decline (deaths per 100,000)

Decrease was unspecified and non-fentanyl



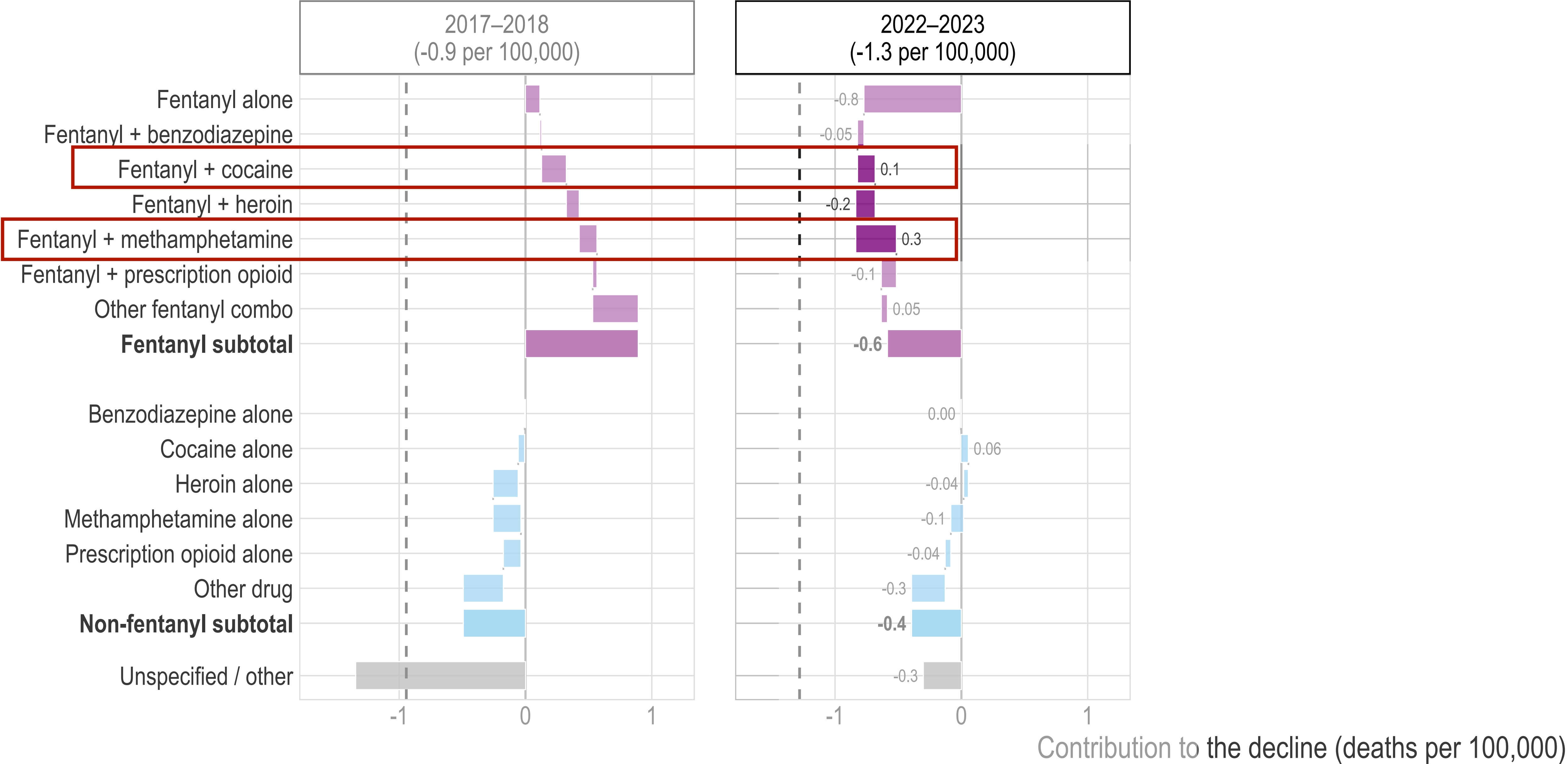
Contribution to the decline (deaths per 100,000)

In the 2023 decline, everything decreased*

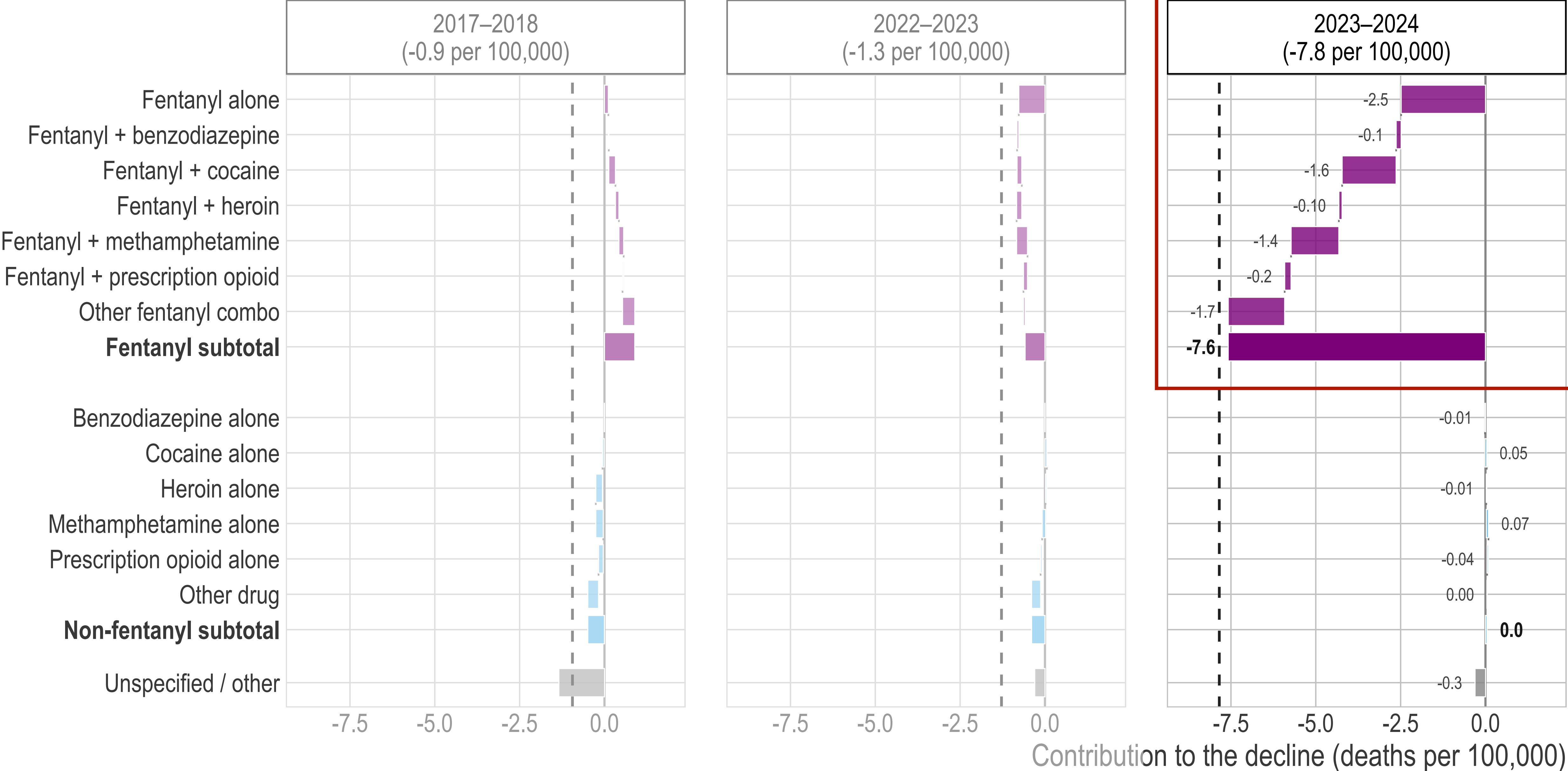


Contribution to the decline (deaths per 100,000)

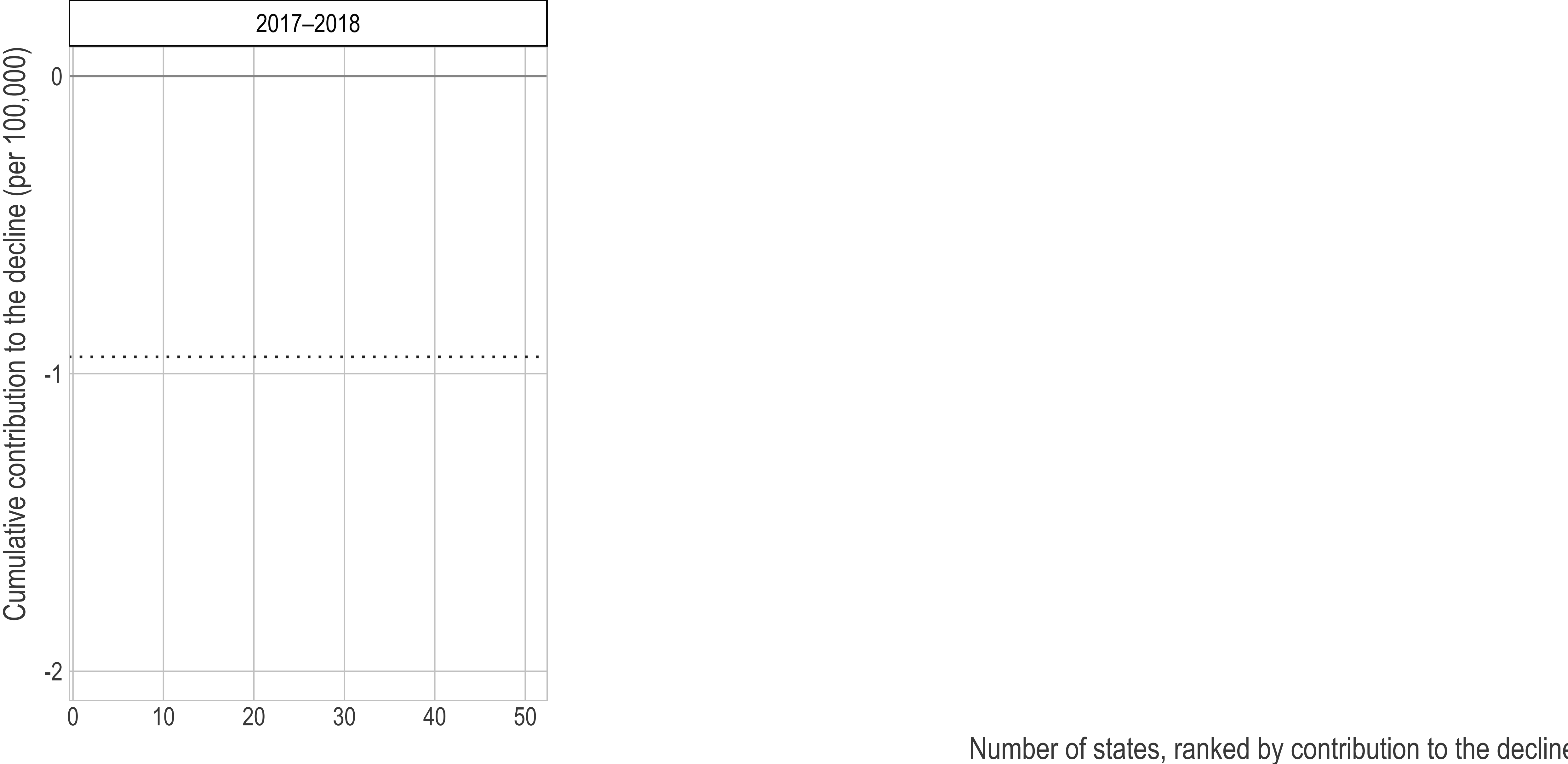
***with exceptions**



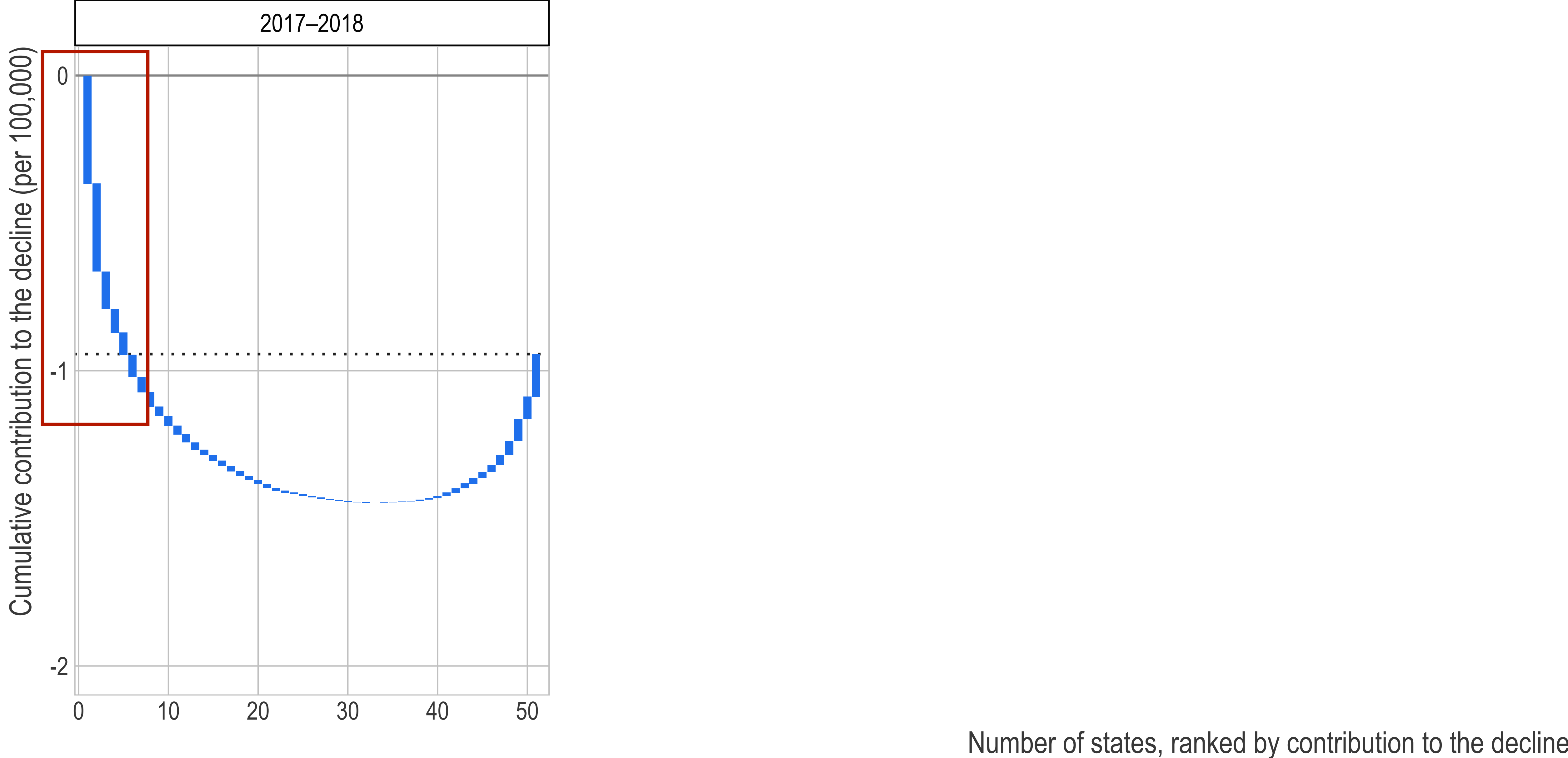
In 2024, only fentanyl decreased (but a lot)



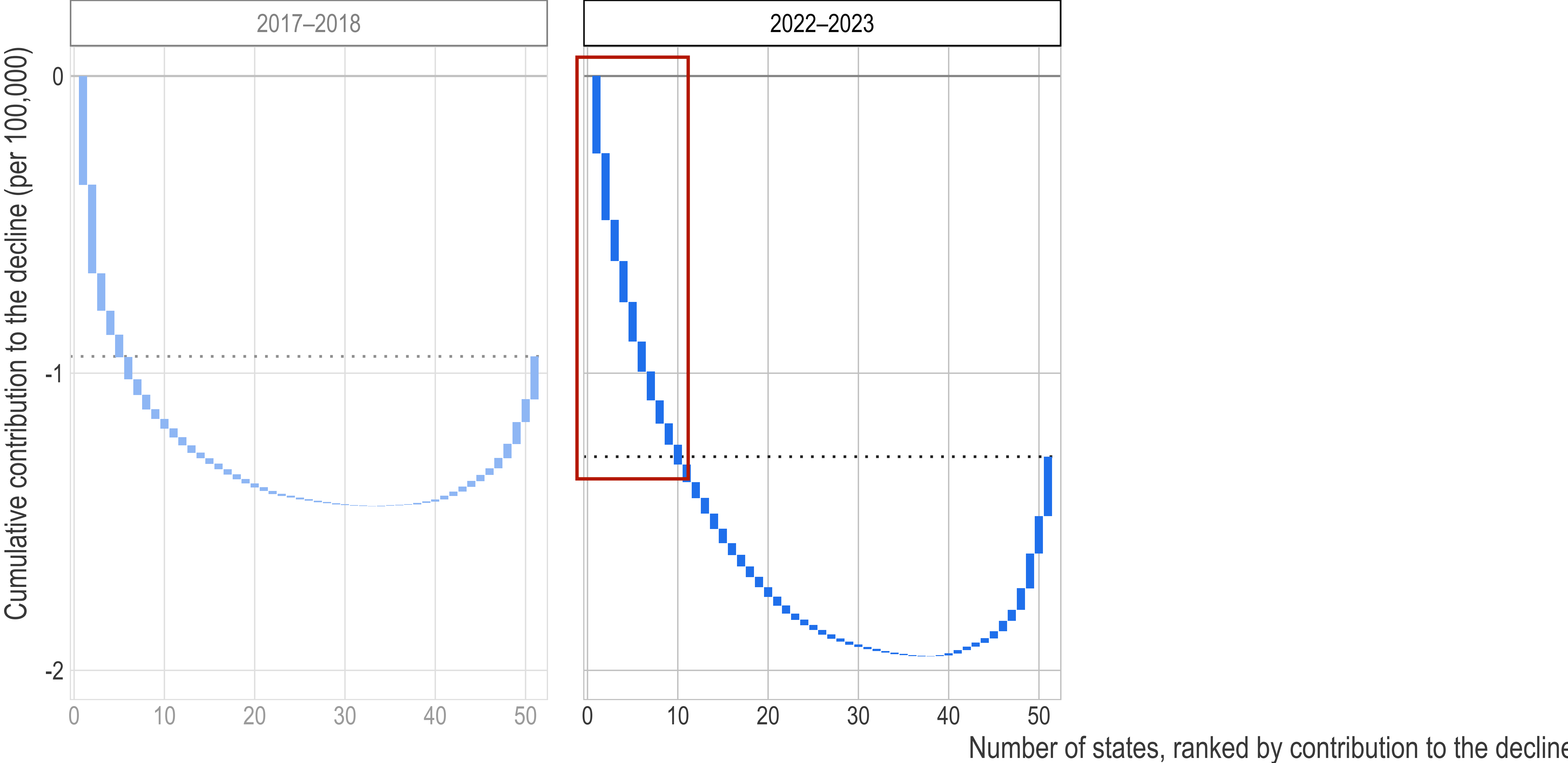
Decreases are getting geographically diffuse



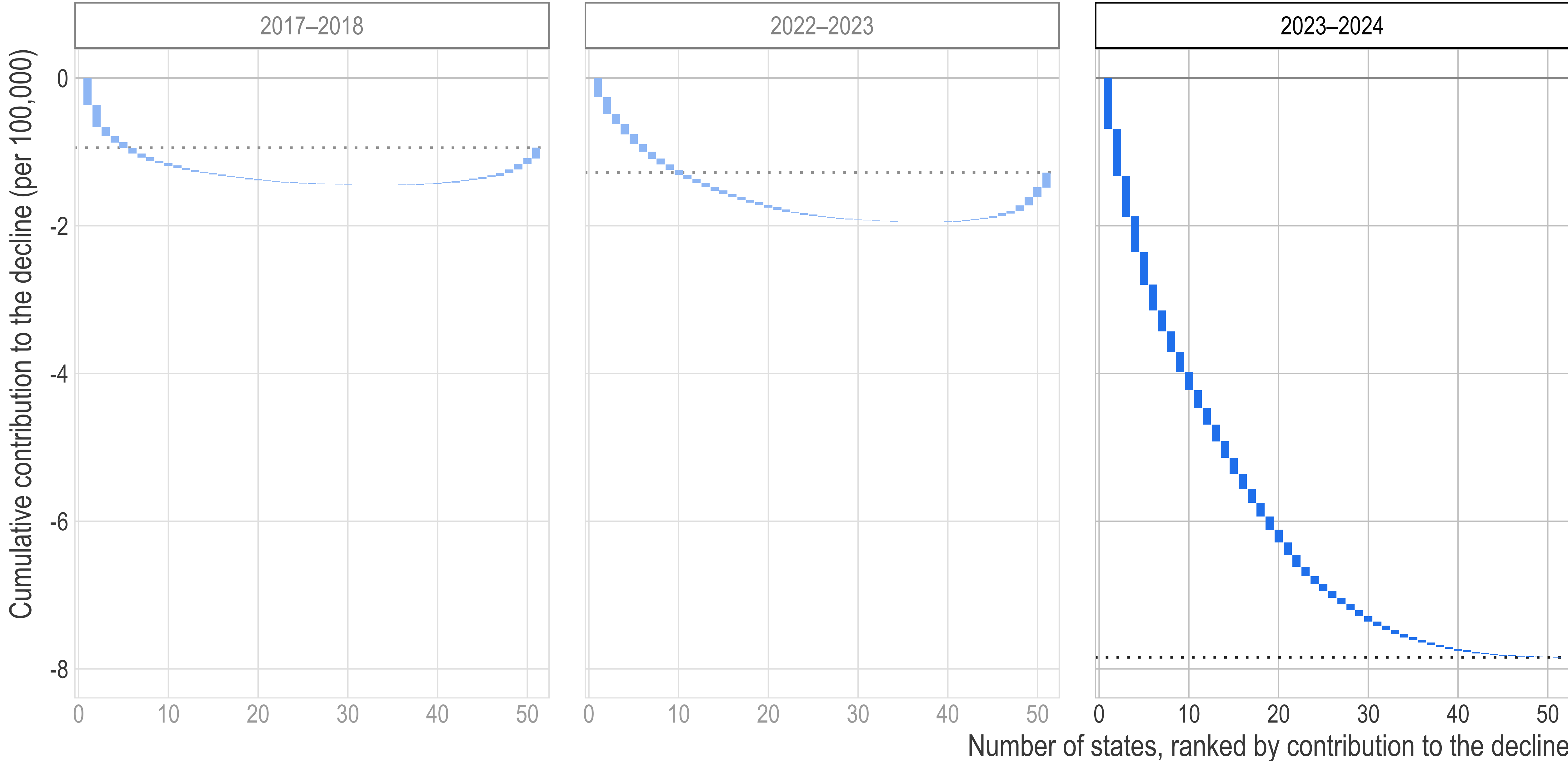
In 2018, five states made up entire decrease



In 2023, ten states



In 2024, every state contributed to decrease



Conclusion

- **Fentanyl accounted for 85%** of the increase in drug deaths from 1999-2022.
- **Fentanyl *in combination*** accounted for 75% of that rise.
- Different combinations have **different geographic patterns**.
- Declines have become increasingly **driven by fentanyl**.
- Declines have become more **geographically diffuse**.
- Decompositions can provide an alternative perspective on the burden of drug deaths.

Thank you

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Stanford University
mkiang@stanford.edu

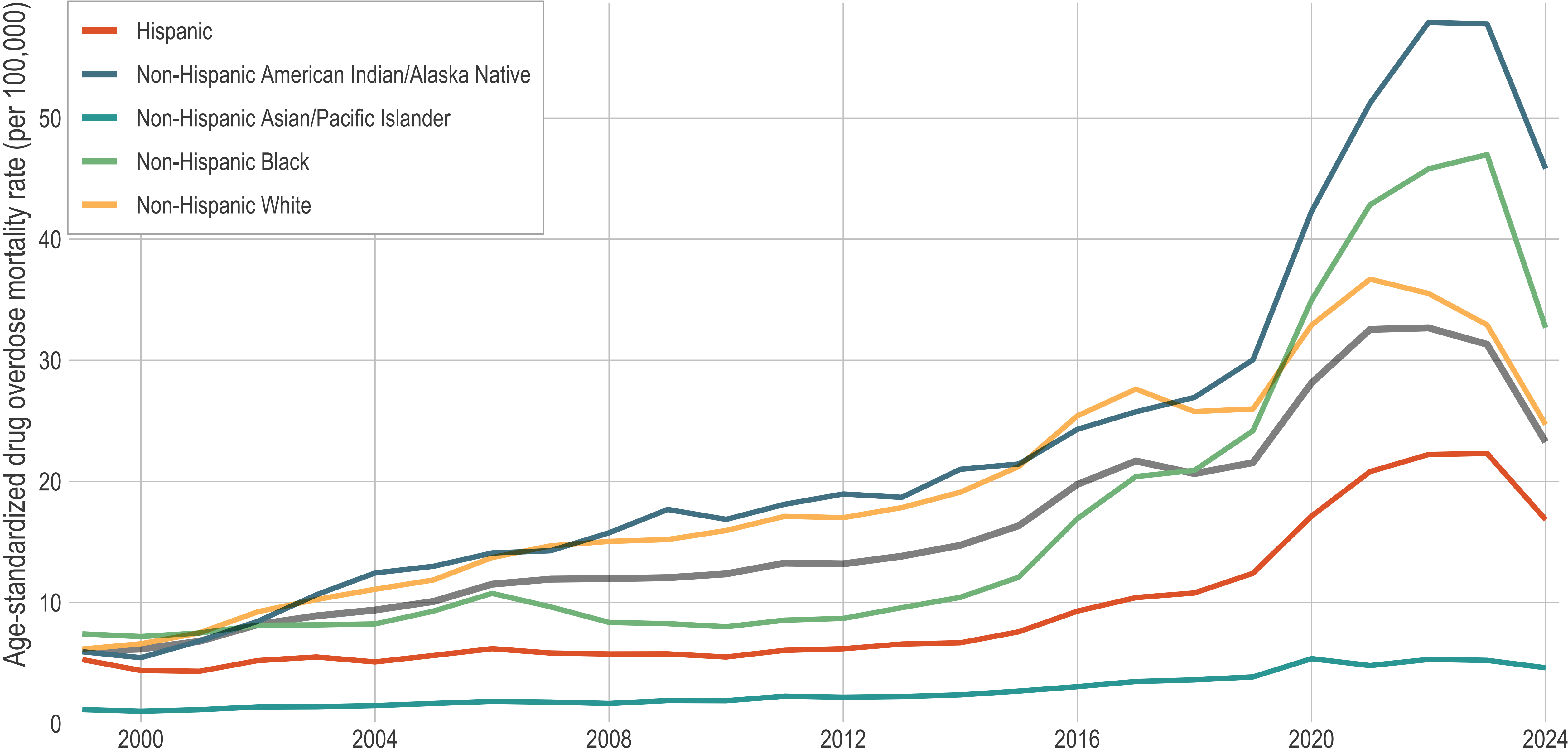
Antonino Polizzi, PhD
Max Planck Institute for
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UC Berkeley

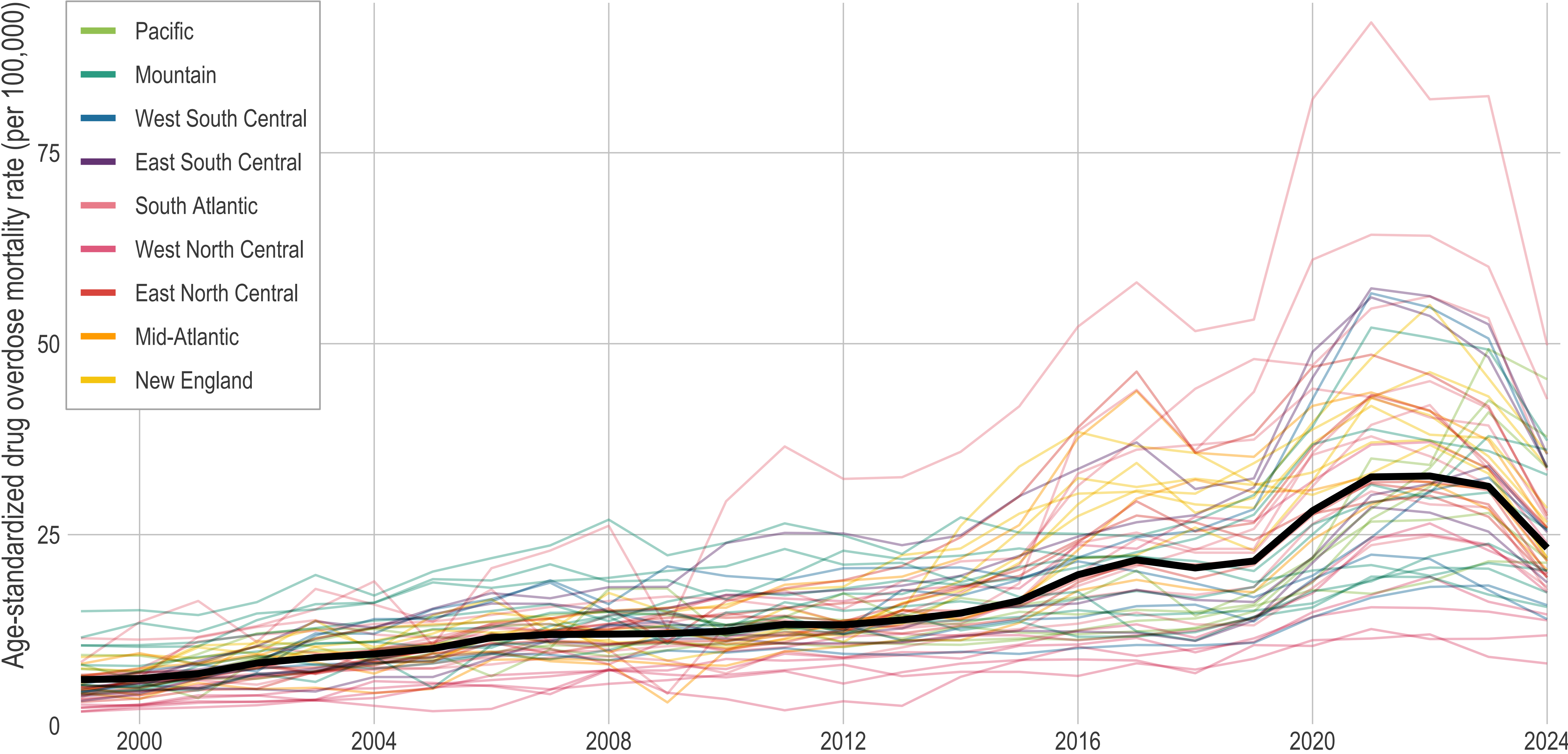
Monica Alexander, PhD
University of Toronto

Extra slides

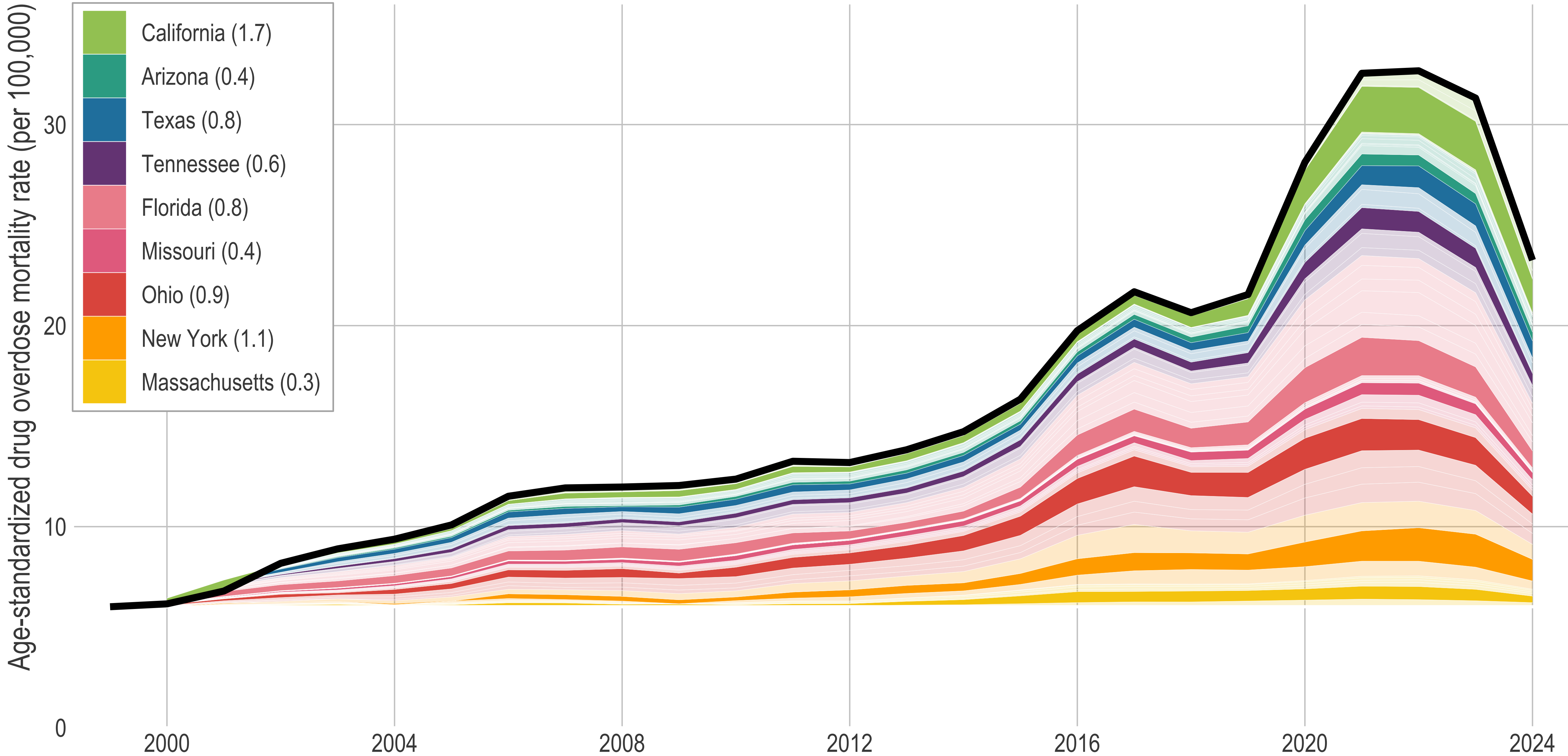
Racial and ethnic inequities



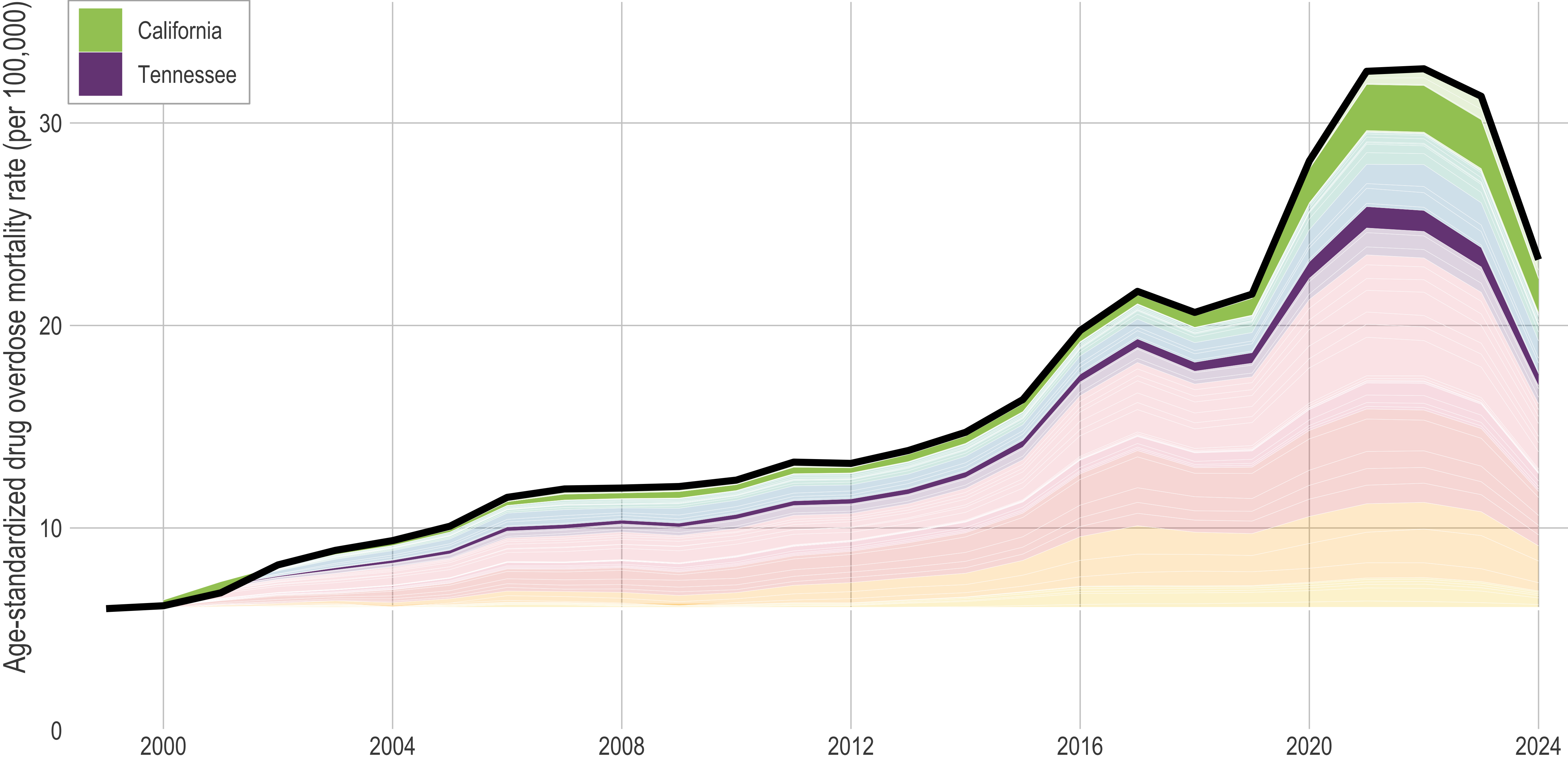
Geographic variation



Example of geographic decomposition



Burden ≠ population



Kitagawa Decomposition

$$R_t = \sum_a \pi_{t,a} \cdot m_{t,a}$$

Kitagawa Decomposition

$$\boxed{R_t} = \sum_a \pi_{t,a} \cdot m_{t,a}$$

- **Crude mortality rate** at time t

Kitagawa Decomposition

$$\boxed{R_t} = \sum_a \boxed{\pi_{t,a}} \cdot m_{t,a}$$

- **Crude mortality rate** at time t
- **Proportion of the population** at time t in age group a

Kitagawa Decomposition

$$R_t = \sum_a \pi_{t,a} \cdot m_{t,a}$$

- **Crude mortality rate** at time t
- **Proportion of the population** at time t in age group a
- **Age-specific mortality rate** at time t in age group a

Kitagawa Decomposition

$$R_2 - R_1 = \sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a}) + \sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})$$

Kitagawa Decomposition

$$\boxed{R_2 - R_1} = \sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a}) + \sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})$$

How much is the **change in the rates**

Kitagawa Decomposition

$$R_2 - R_1 = \underbrace{\sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a})}_{\text{composition}} + \sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})$$

How much is the **change in the rates** attributable to differences in the **population composition**

Kitagawa Decomposition

$$\underbrace{R_2 - R_1 = \sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a})}_{\text{composition}} + \underbrace{\sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})}_{\text{rate}}$$

How much is the **change in the rates** attributable to differences in the **population composition** and how much in differences in **mortality**?

Kitagawa Decomposition

$$R_2 - R_1 = \underbrace{\sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a})}_{\text{composition}} + \underbrace{\sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})}_{\text{rate}}$$

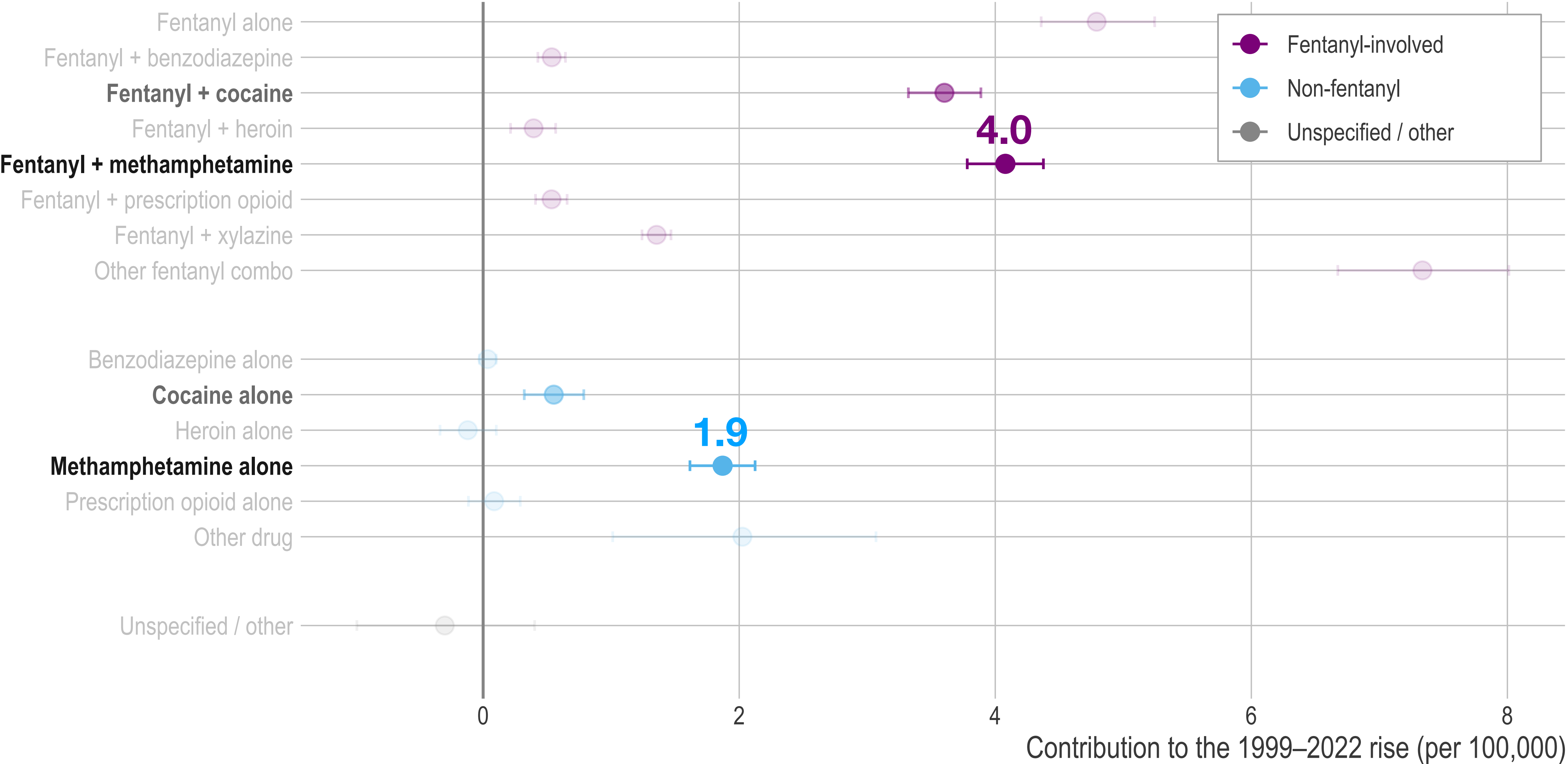
- Generalized to the age-standardized national rate change:
 - substance-specific (e.g., fentanyl + cocaine) component
 - geography-specific component
 - (also race-, sex-, and age-specific but not discussed here)

Kitagawa Decomposition

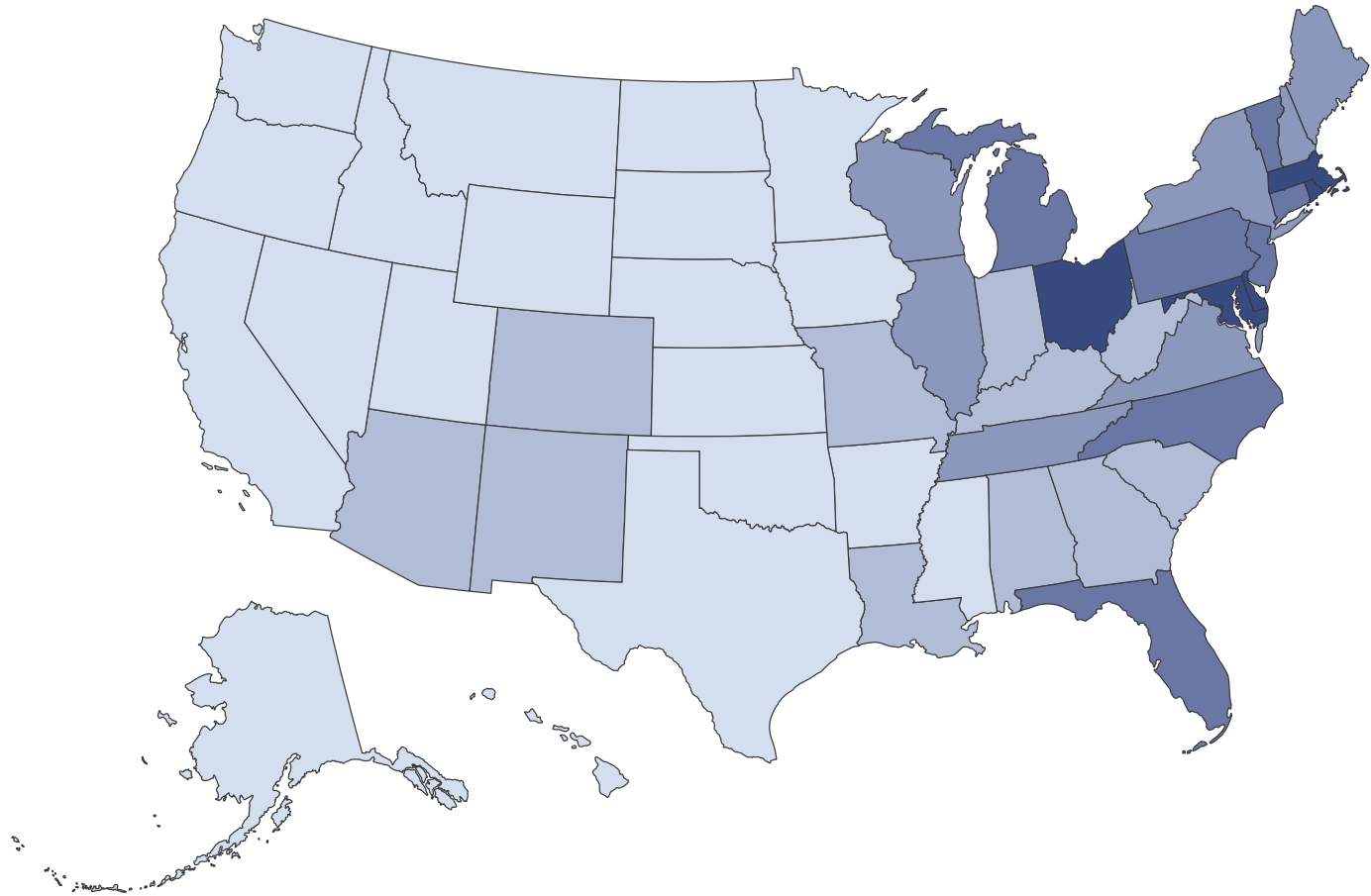
$$R_2 - R_1 = \underbrace{\sum_a \frac{m_{1,a} + m_{2,a}}{2} (\pi_{2,a} - \pi_{1,a})}_{\text{composition}} + \underbrace{\sum_a \frac{\pi_{1,a} + \pi_{2,a}}{2} (m_{2,a} - m_{1,a})}_{\text{rate}}$$

- Decomposition is **exact** so uncertainty is only via negative binomial
- Results only show the rate component

Fentanyl + methamphetamine 2x higher

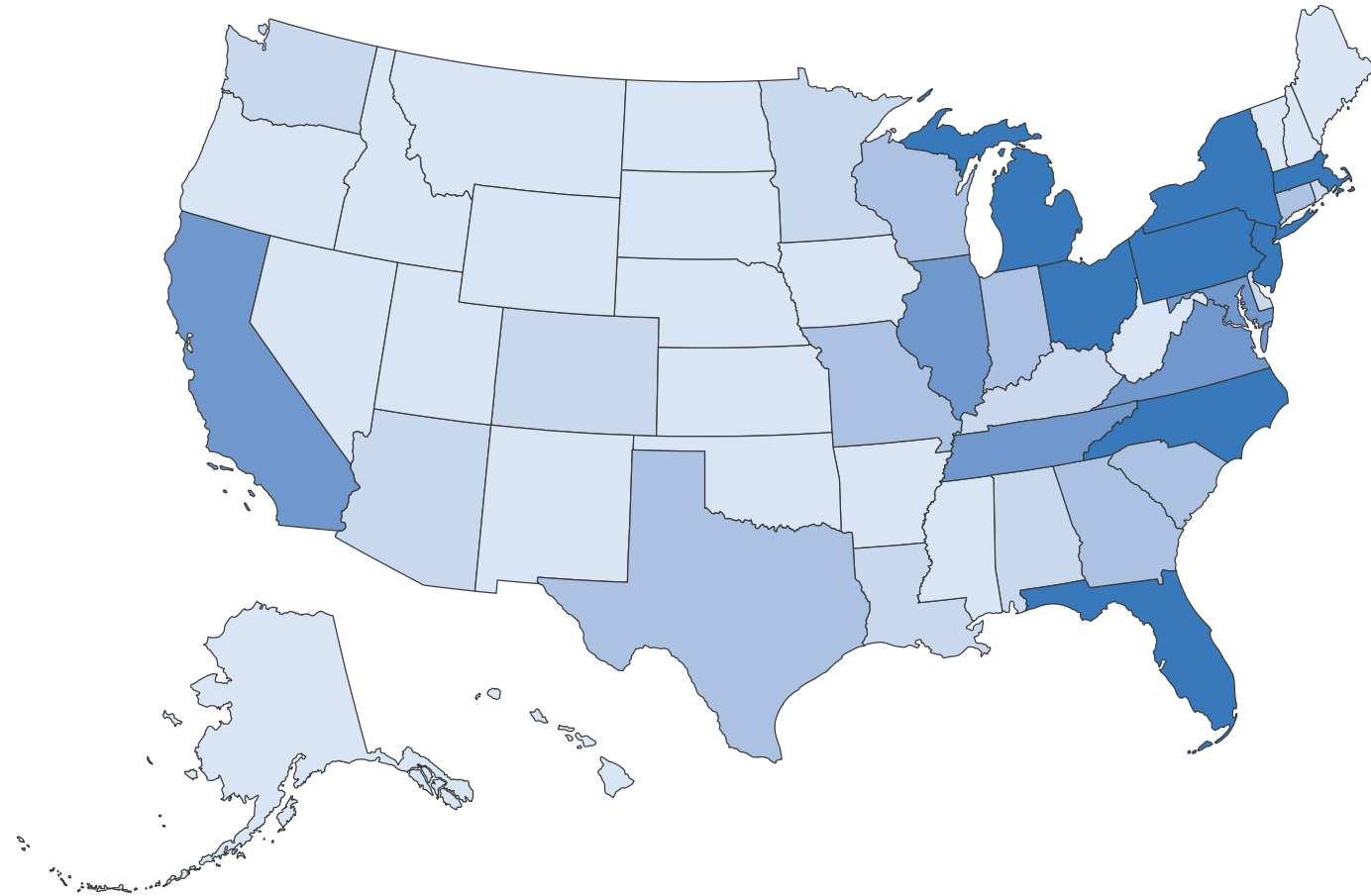


State-level comparison



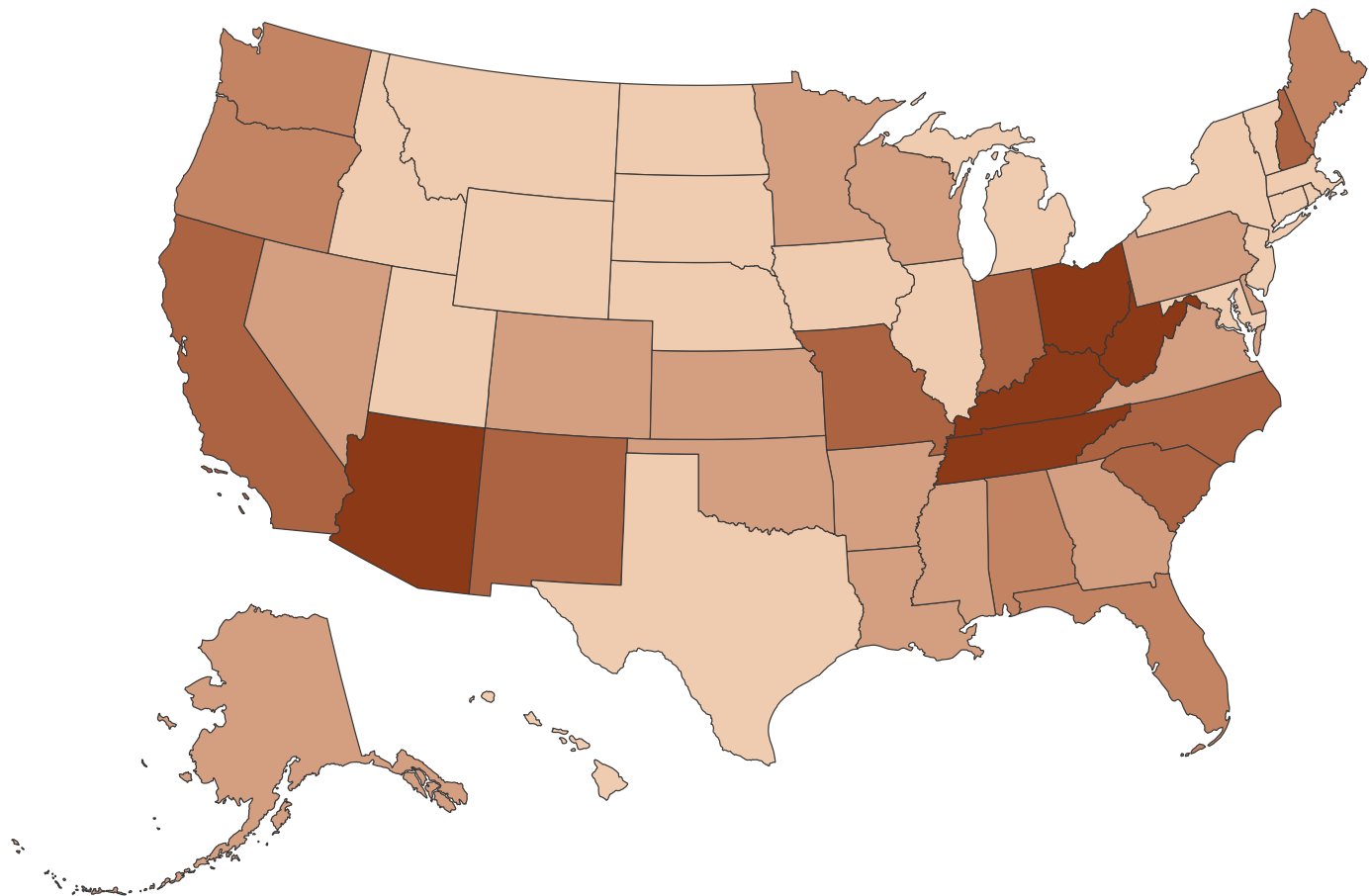
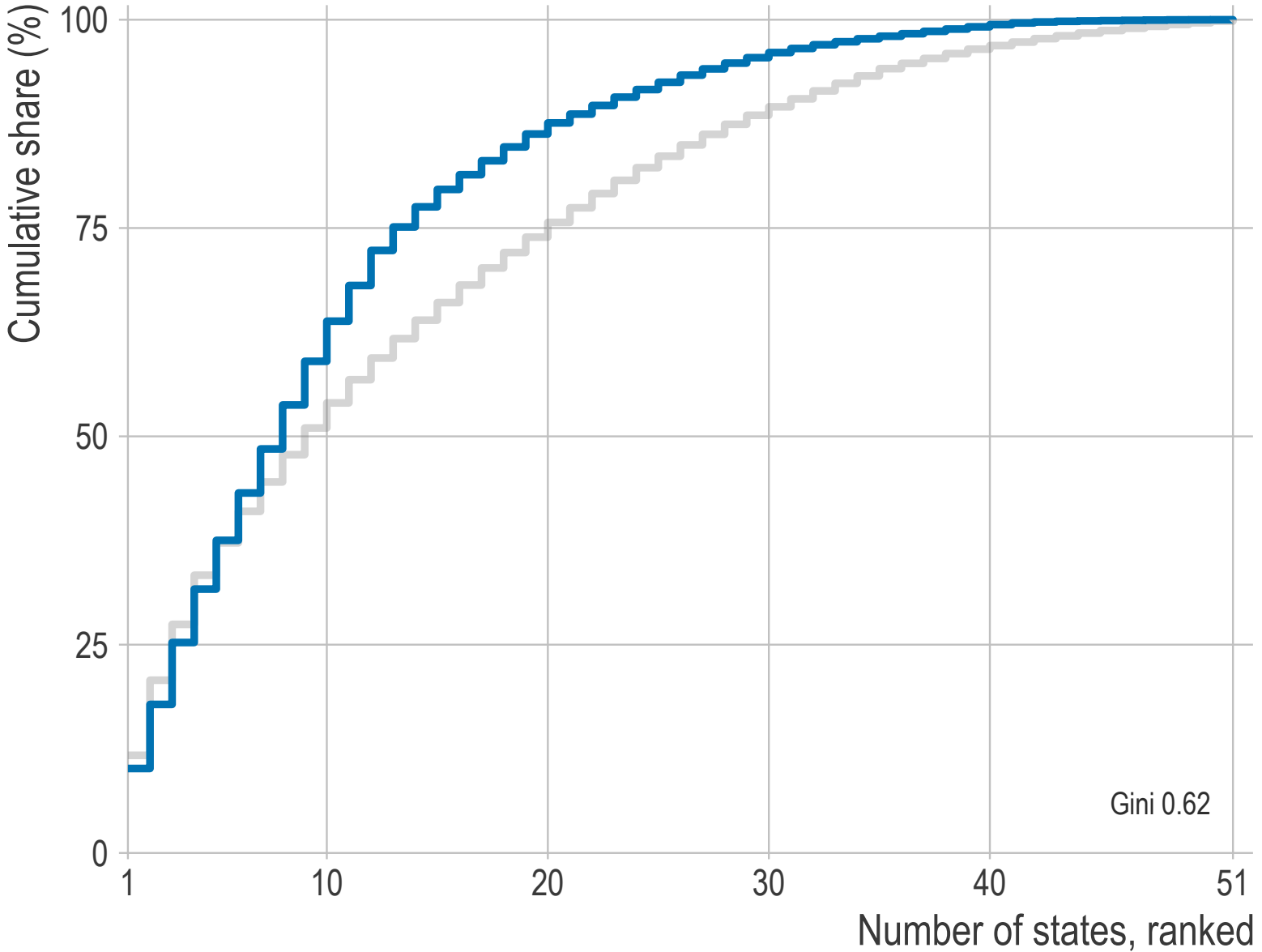
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.2 0.6 0.9 1.2 1.8



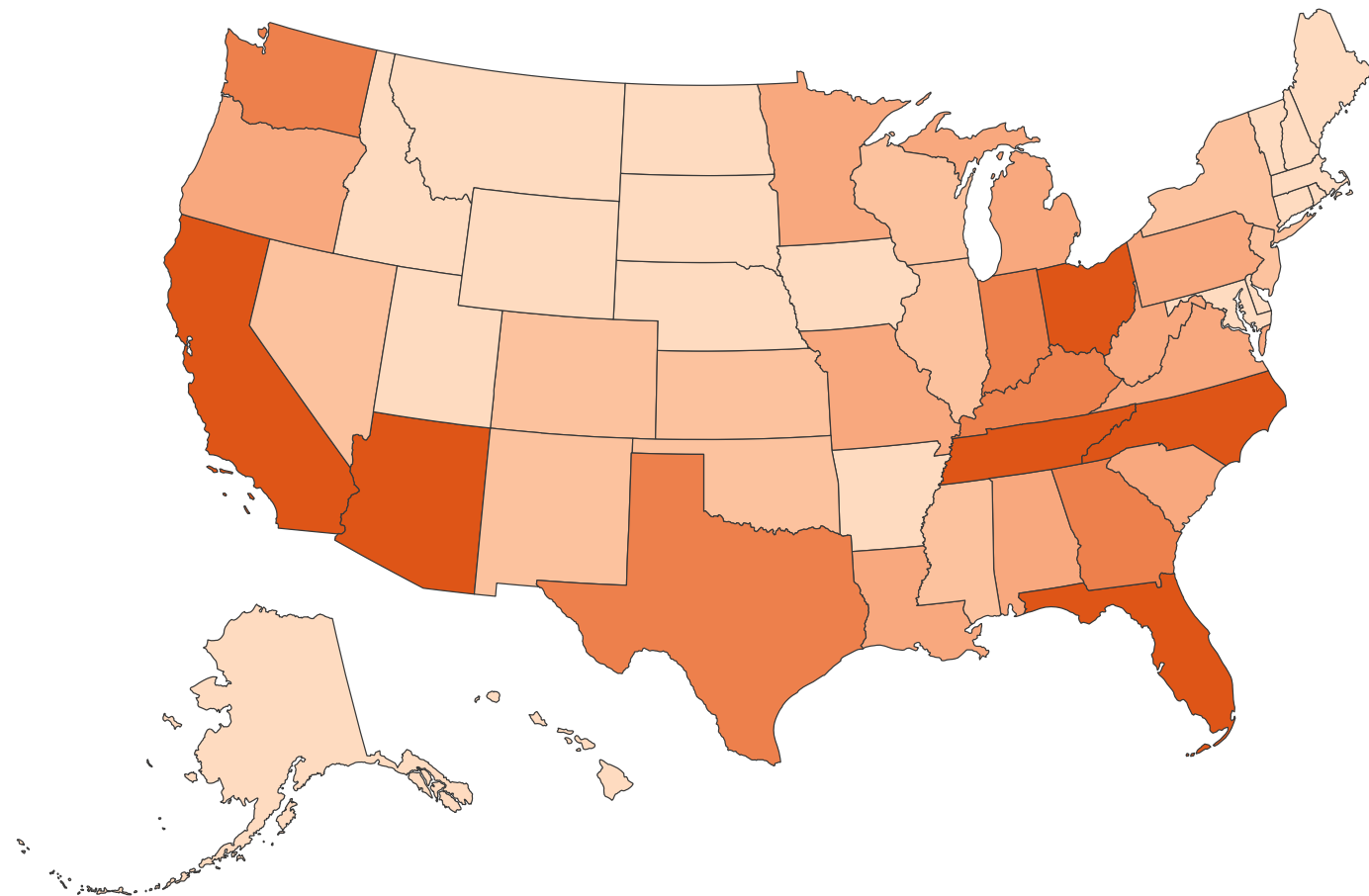
Contribution to national rate change (per 100,000)

0.00 0.02 0.04 0.10 0.19 0.22



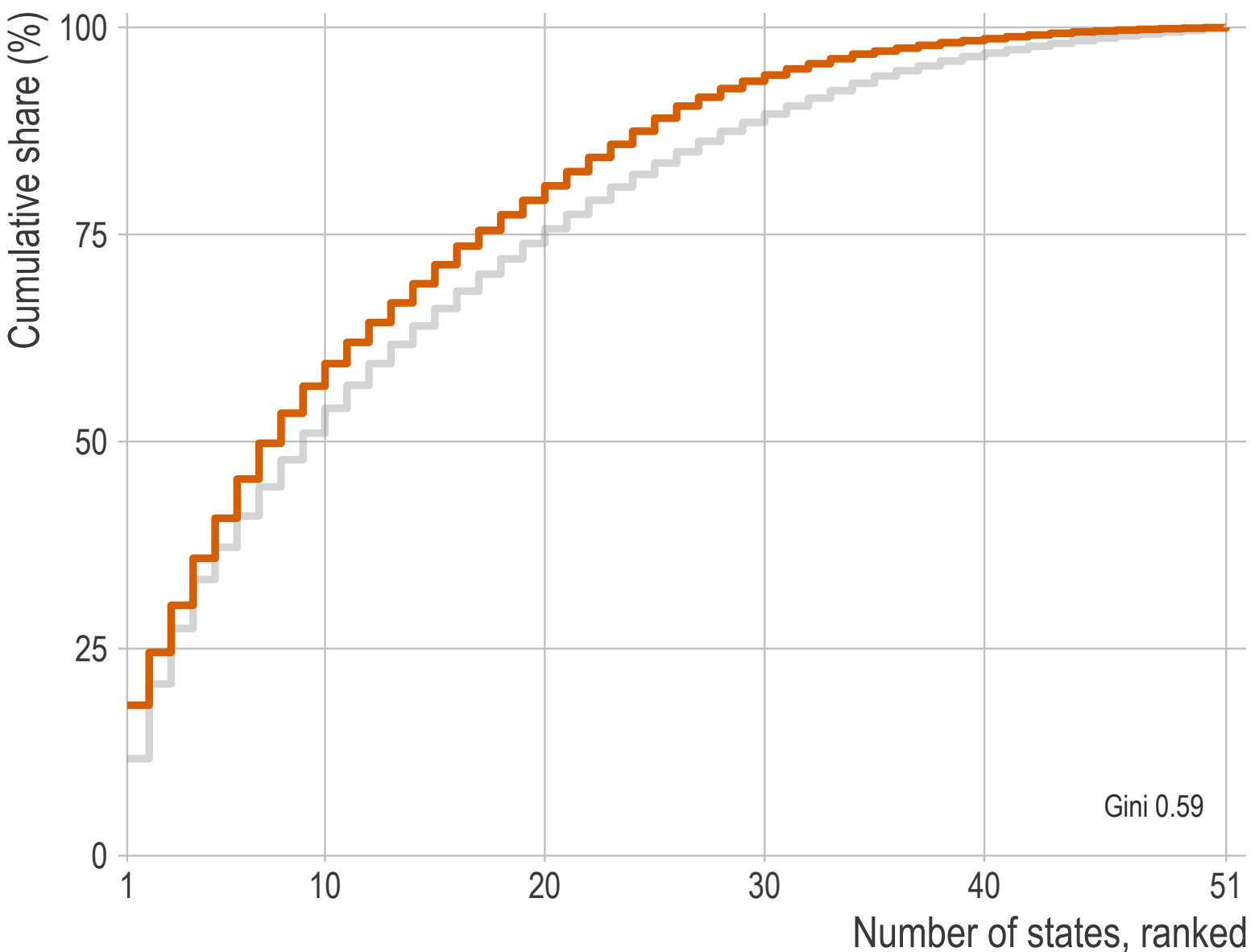
Age-standardized mortality rate (per 100,000 person-years)

0.0 0.3 0.5 0.6 0.9 1.1

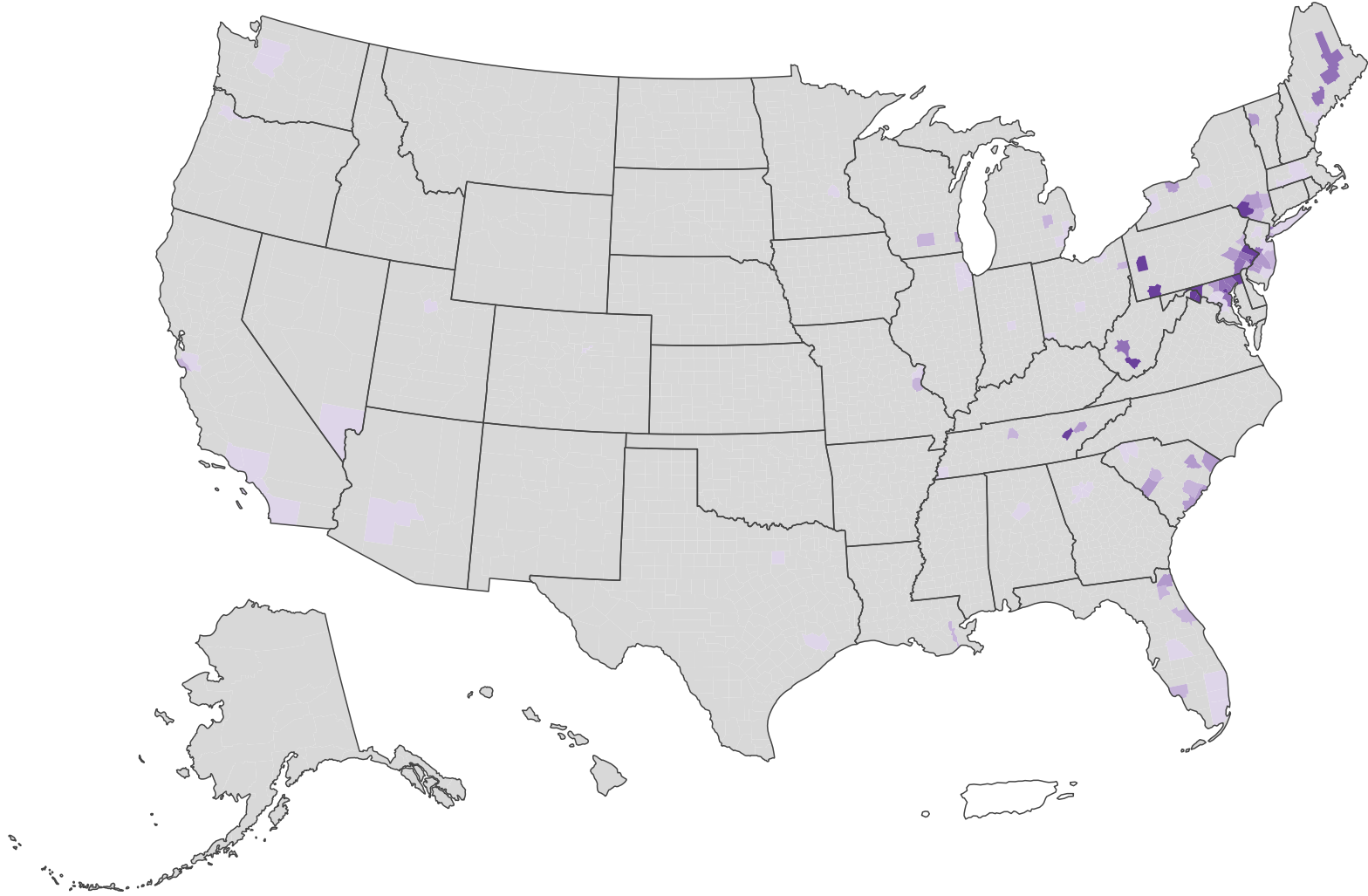


Contribution to national rate change (per 100,000)

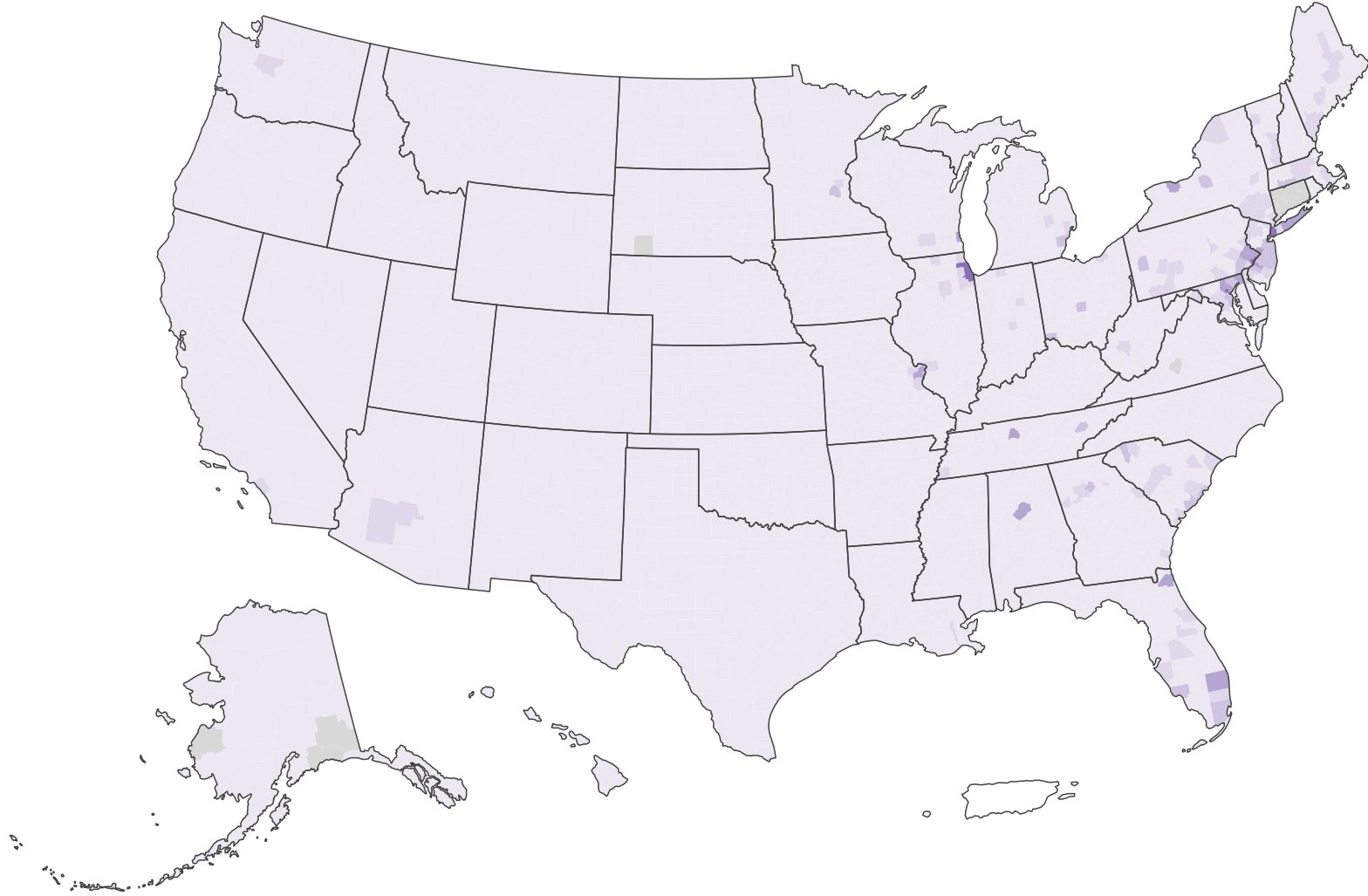
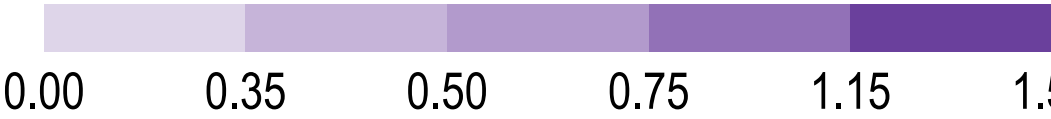
0.00 0.03 0.07 0.10 0.18 0.21



Xylazine



Age-standardized mortality rate (per 100,000 person-years)



Contribution to national rate change (per 100,000)

