Pennsylvania State Coroners Association

Report on Overdose Death Statistics
2015

“To the living we owe respect, but to the dead we owe only the truth.” Voltaire
“And I looked, and behold a pale horse: and his name that sat upon him was Death”
Revelations Chapter 6 Verse 8

This report in the following pages provides statistics on deaths where drugs caused or contributed to the death of an individual. In reviewing the numbers on these pages we must be mindful that each number represents a history of an individual with hopes and dreams and families and friends. It is hoped that these numbers can assist in developing policies that will help abate this terrible scourge of drug related deaths.

This year’s report would like to highlight a group of families from Butler County as they are coping with the drug addiction in their lives. They are engaged in many activities to highlight the problem and to help find solutions. As summed up by one mother:

“But we have to stop the stigma & stop the silence!! I’m a firm believer in that.”
“Hope for Broken Hearts” is a family support group for people affected first hand, with loved ones caught up in addiction. It was started to give families a safe, confidential place to release their emotions and frustrations when dealing with addiction.

This group focuses on hope, support, education and saving lives. All people need the hope of turning around devastating situations. Members can speak openly about their experiences and their fears that other people cannot begin to understand. We support each other and gain strength in support and knowledge. Educating each other is important. We need to understand what opiates do to loved ones in order to deal with the devastation it causes. Along with the education is being prepared for an overdose. Overdoses happen anywhere at any time. Most of the members have been trained and carry Naloxone (Narcan) at all times. All lives are worth saving.

The drug epidemic does not just affect the families. This affects the community either directly or indirectly. We are losing people to addiction. This affects all families, every neighborhood, and every social status. No one is immune.

We need education on all levels. We need to have reality drug education in schools. The programs need to be more in depth than being told drugs are bad & just say no. They need to know the reality. They need to know what heroin does to the brain after just trying it once or twice. People need to know, too. Some would rather waste time debating if it is a choice or a disease. Yes, it was a choice the first time or two. After that it changes the way the brain functions. People are dying every day. We need to do more than talk about it. When the way we have done things for years doesn’t work, it is time to do something different.

“Hope for Broken Hearts” has been doing a variety of things to help get the heroin epidemic out in the public eye.

Some of the things we have done include:

- Sent letters to doctors & dentists in the area to encourage them to not write prescriptions for opiates when there is an alternative medicine.
- Recognized by Butler County Commissioners with a proclamation declaring May as Drug Awareness Month.
- Traveled to another county for Naloxone (Narcan) training for our group.
- Set up first Naloxone Training in Butler County, with 90 people in attendance receiving life-saving naloxone take-home kits. (We had a waiting list for this class.)
- Spoke at CJAB (Butler’s Criminal Justice Advisory Board).
- Sought out needed grant information for Naloxone. Through CJAB, police in Butler City, Butler Township & various boroughs were able to be trained & carry Naloxone.
- Attended various drug summits.
- Held Drug Awareness Seminar at Butler County Community College with educated speakers active in dealing with addiction.
- Held first annual Candlelight Overdose Walk in Butler (Fall 2015).
- Participated in week long informative booth at Butler Farm Show, talking, listening and sharing information. Heard both heartbreaking reality stories & also positive recovery stories.
- Took part in the Butler Fall Festival & RiverFest in East Brady, handing out information.
- Spoke at various county level meetings.
- Took part in a webinar phone call with the White House regarding the drug epidemic.
- Attended a Relapse seminar in another county.
- Recognized from The Gaiser Addiction Center at a special Valentine’s Breakfast, as they also handed out free naloxone kits to participants.
- Held our 1st free community movie night, showing documentary of a town that completely turned their community around from their drug use. (An Appalachian Dawn) Very positive responses. Others want to show the movie at their churches.
- Held our 3rd annual drug awareness walk (Walk of Hope) in downtown Butler in May of 2016.

This year’s “Walk of Hope” had a record number in attendance despite the rain. Every year it keeps growing. There were a couple of speakers. There were pastors from different churches to offer up prayer for the families, the ones fighting addiction, the ones in recovery, and for our community.

We are encouraging others to find a family support group in their community. There are many hurting families that need to know they are not alone. If you cannot find a group that fits your needs, start one. Together, a few people can do great things. Our core group is small. We have done all these things within 2 ½ years. Everyone can make a difference. We cannot just sit back and watch this devastation destroy our families and loved ones. We need to speak up. We need to let them know there is hope. Recovery is possible. Things can get better.

We believe there is HOPE of recovery. Our group is there to SUPPORT each other. We emphasis the importance of EDUCATION, not only within our group, but with the public. We understand the importance of SAVING LIVES. Every life is worth saving.

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Data Collection

For the period of January – December 2015, the Coroners and Medical Examiners of the Commonwealth reported 3,505 deaths resulting from drug poisoning. This number may not reflect all drug related deaths for the time period, since there is lag time in getting toxicology reports and autopsy reports completed and not all drug related deaths may have been reported to the Coroner or Medical Examiner. Therefore, the current totals may ultimately be increased. Of the cases investigated by the Commonwealth’s Coroners and Medical Examiners, toxicology results determined that the drugs listed below were present at the time of death. It is important to note that each death is a single case, while each time a drug is detected represents an occurrence. The vast majority of the decedents had more than one drug occurrence.

A drug is indicated as the cause of death only when, after examining all evidence and the autopsy and/or toxicology results, the Coroner/Medical Examiner determines the drug is present or identifiable in the deceased and has played a causal or contributing role in the death. It is not uncommon for a decedent to have multiple drugs listed as a cause of death. This report is limited to deaths where the manner of death is accident, suicide, homicide or undetermined. The reported deaths herein do not include natural deaths, where there may be a significant number of drugs in the person’s system, but the drugs are not determined to be the cause of death. But, if the drugs were determined to have a underlying impact on a death, which is otherwise due to medical complications, it is included in this report even though it has been determined to be a natural death.

Data and demographics may be missing or flawed from certain counties which will alter the outcome of various totals to a certain degree.

Of the 67 counties data has been received from all 67 counties. The Coroners and Medical Examiners who took time out of their busy schedules serving the people of their counties in determining the cause and manner of death of those who have died as a result of violent acts, unintentional or intentional, are gratefully acknowledged. Without their assistance this report would not have been possible.

Any perceived opinions in this Report are those of the compiler of the Report and do not necessarily reflect the opinions of the Pennsylvania State Coroners Association, nor any individual Coroner or Medical Examiner in the State of Pennsylvania.

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PSCA Solicitor/Legislative Liaison

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**Report Summary**

The CDC has stated that our country is in the midst of an overdose epidemic.

The New York Times quoted Dr. Hamilton Wright of Ohio stating “Of all the nations of the world, America consumes the most opium in one form or another. The habit has this Nation in its grip to an astonishing extent. ... The drug habit has spread throughout America until it threatens us with a very serious disaster.” What is astonishing about these comments is not that they were said, but when they were said. These remarks were made in 1911 by the first appointed US Drug Czar (appointed by President Theodore Roosevelt).

Drug related deaths have continued to increase. In 2014 that number reached at least 2,489 individuals. The year 2014 showed an average increase of about 20% over the prior year for many counties. In 2015 the number of drug related deaths increased to 3,505 or a 30% increase over the prior year. If, initial data for 2016 is any indication, the number of deaths will continue to increase.

Ten (10) people die every day in Pennsylvania from drug related causes. Not known are the number of persons who overdose but survive. In addition, this number may be somewhat conservative since many hospitals will throw away admission blood after three days, leaving nothing to be forensically analyzed in case of death.

The age of the deceased ranges from under 2 months to 94 years of age. The majority of deaths are found in the age group 30 – 39 years old, but with the vast majority occurring between the ages of 30 – 49 years old. Men represent 2/3rds of the deaths. Deaths are split along racial lines in accordance with the percentages represented in the Commonwealth. The typical decedent is single, either never been married, divorced or widowed.

Most deaths are the result of multiple prescription drugs either alone or with the addition of heroin or cocaine, to a lesser degree. In addition, there has been a significant increase in the number of heroin deaths which were accompanied by the addition of fentanyl or acetyl fentanyl. Also, the use of cocaine to which levamisole has been added continue to increase. Lastly, there is an increase in the presence of THC found in marijuana and synthetic cannabinoids. The latter drug is also seen increasingly in statistics reported by the PSP on impaired driving.

Found in 14% of the toxicology reports of the drug related deaths are the opioids generally prescribed to treat addiction or overdose events, methadone, buprenorphine (found either as suboxone or subutex), naloxone, naltrexone. Methadone is prescribed in clinics under the regulation of the Substance Abuse and Mental Health Services Administration (SAMSHA) and the Pennsylvania Drug and Alcohol Programs. To prescribe buprenorphine, the prescriber only needs to secure a DEA authorization.

As stated by US Senator Tim Murphy at the beginning of hearings he is chairing into the issue of Examining The Growing Problem Of Prescription Drug And Heroin Abuse: State And Local Perspectives, March 26, 2015:

> "Buprenorphine can more safely maintain a person’s dependence by reducing the need for illegal opioid use, such as heroin, and thereby the risk for overdose. But make no mistake, buprenorphine is a highly potent opioid, which according to SAMSHA, is 20 to 50 times more potent than morphine. So it is worth considering that our national strategy to combat substance abuse is to maintain addiction by either prescribing or administering a heroin-replacement opioid. ... And unlike clinics that administer methadone, there are no requirements for buprenorphine clinics to offer or even discuss non-addictive treatment alternatives, no requirement to develop treatment plans, no requirements to protect the public against it being diverted for illicit use."

Statewide drug related deaths occur throughout the year with a slight increase in October. (In 2014 the slight increase was in May.) Deaths generally increase on the weekends and 2/3rds of the deaths occur between the hours of 4 PM and 8 AM.
There are several ways in which these drug-related deaths may be characterized and each requires a solution which considers the unique variables. There is the group of children either born with NAS or toddlers exposed to drugs and those drugs used for treatment who in error access them with fatal results. There is the group of teens and younger adults who are experimenting with drugs, perhaps as a matter of peer pressure. There is the vast majority of adults who perhaps believe that the American Dream has passed them by, have become addicted and see no clear path to recovery or have been unable to readily access the means of recovery. There are the elder citizens who are generally not experimenting with illegal drugs but are overdosing on prescribed medications. And, lastly, there are the veterans who have volunteered to serve our country and who come home with medical issues and mental health issues for which they have been receiving inadequate treatment in the form of a cocktail of drugs – a sleeping pill, anti-anxiety medication, an anti-depressant, and an anti-psychotic and sometimes, even a stimulant.¹

While the Federal Mental Health Parity Law requires parity for addiction treatment, that parity remains elusive. There are insurance companies who don’t do admitting paperwork on a weekend, there are a scarcity of pain management practices or clinics, there is an apparent lack of facilities with beds to provide long term treatment or to accept mothers with their small children, so as to not needlessly further tear apart families during the healing process.

There needs to be a stronger tying of an overdose incident with the treatment process. Merely handing someone a card with locations of any treatment programs in the area doesn’t appear to be adequate. If someone is ready to commit to getting treatment, suggesting treatment may be available in a couple of days or weeks is not adequate. And while there are appropriate, necessary privacy concerns and Constitutional issues involving the 14th Amendment regarding involuntary commitments for treatment, providing Narcan without further follow-up is probably just changing the date of death.

There needs to be a scalpel brought to the discussion of broad based policies to stem the tide of this drug pandemic. Take for example, an elderly women who has been diagnosed with pain generating medical issues. She has been given a prescription to relieve the pain while waiting 4 months to get another appointment with a specialist. This prescription is only valid for two weeks. After two weeks she has to get a relative to take her to the doctor to get another two week supply. She has no diagnosed tendencies to abuse or divert the drugs for another use, she has been caught in a system to try to stop abuse.

Another example is a mother with a child who has been diagnosed with ADHD. She can get a thirty day supply of the needed drugs, but to get a refill she must travel at least half an hour and on the precise day the prescription runs out to get a refill. Again, there are no indications of drug abuse or diversion of the use of the drugs for another purpose, she has been caught up in a one-size-fits-all system to stop drug abuse.

Can we not trust any of our physicians to exercise judgment in filling prescriptions? Shouldn’t the ABC-MAP Act of 2014 provide the information necessary to catch those who would abuse their ability to prescribe?

Another obvious conclusion from reviewing the data relates to the number of drugs found in an individual’s toxicology. While the average number of drugs, both prescription and illegal is about 3 per person, there are too many instances where an individual may be found with multiples of a classification of drugs. An example is the toxicology of one individual who had five antidepressants in their toxicology. Why would anyone take such multiples of one type of drug? Perhaps part of the answer may be found in the current use of drugs for off-label purposes. For example, antidepressants are prescribed by various physicians for treatment of disorders other than depression -- anxiety, sleep issues, pain, headaches, smoking cessation, premenstrual syndrome, premature ejaculation². In fact the CDC has indicated that the rate of use of antidepressants has increased nearly 400% since 1988.

² 5 Surprising Uses for Antidepressants, Wyatt Myers, www.everydayhealth.com
Another concern is when a patient is hospitalized after a nonfatal prescription opioid-related overdose, leaves the hospital or ER, and then continues to receive opioid based treatment. Perhaps there is not communication that the patient has been treated for an overdose to the prescribing physician, perhaps the patient has made no connection between the condition for which the opioid treatment is prescribed and the overdose. Perhaps this nonfatal overdose should represent an opportunity to identify and treat substance use disorders.

It should be clear that there is a widespread commitment to share drug information with patients, but it is equally unclear whether the reason for the medication prescription is generally recorded or shared. The prescription label gives the name of the drug, the dosage and the number of times to take. It does not give an indication of the purpose served by its taking. Perhaps, there is a need for a Patients Drug Bill of Rights, such as suggested in the N Engl J Med, July 28, 2016, to provide for safe medication ordering and use – “the right patient, right drug, right dose, right time, right route ... {and the } right indication.”

This report is based upon a review of toxicology results and does not include any review of a decedent’s prescription history, evidence at the scene (which may be collected by coroners or law enforcement based upon county protocol), autopsy results, investigatory reports or interviews with next of kin, friends or witnesses.

It is time to search for solutions that recognize the different faces of the drug issue, the addict, the family, those who will get caught in any broad based, one-size-fits all remedies. As Albert Einstein is quoted to have said, “Insanity is doing the same thing over and over again and expecting different results.” No one can be a passive observer in thinking we can solve this problem by the same thought process which created it.

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Glossary of Drugs

Amphetamines – A group of synthetic psychoactive drugs called central nervous system (CNS) stimulants. The collective group of amphetamines includes amphetamine, dextroamphetamine, and methamphetamine. Methamphetamine is also known as “meth,” “crank,” “speed” and “tina.” They may also be found in drugs for ADD or ADHD.

Benzodiazepines – A family of sedative-hypnotic drugs indicated for the treatment of stress, anxiety, seizures and alcohol withdrawal. Benzodiazepines are often referred to as “minor tranquilizers.” Xanax (Alprazolam) and Valium (Diazepam) are the most commonly prescribed drugs in this drug class.

Buprenorphine – A semi-synthetic opioid known as Buprenex, Suboxone, and Subutex indicated for the treatment of opioid addiction and moderate to severe pain.

Cathinones - a family of drugs containing one or more synthetic chemicals related to cathinone, an amphetamine-like stimulant found naturally in the Khat plant. They are 'cousins' of the amphetamine family of drugs, which includes amphetamine, methamphetamine and MDMA (ecstasy). It often goes by the street name of “Molly.”

Cannabinoids – A series of compounds found in the marijuana plant, the most psychoactive of which is THC, a strong, illicit hallucinogen. Street names for this drug are often associated with a geographic area from which it came but also include generic names like “ganja,” “MJ,” “ragweed,” “reefer” and “grass.”

Carisoprodol – Muscle relaxant indicated for the treatment of pain, muscle spasms and limited mobility. It is often abused in conjunction with analgesics for enhanced euphoric effect. It is marketed as Soma.

Cocaine – An illicit stimulant. Powdered cocaine goes by many street names including “C,” “blow,” “snow,” and “nose candy,” while freebase cocaine is mostly commonly known as “crack.”

Ethanol – ethyl alcohol.

Fentanyl – Synthetic narcotic analgesic (pain killer) used in the Durgesic transdermal patch. Also available in a solid “lollypop” sold under the brand name Actiq.

Flunitrazepam (Rohypnol) – Commonly referred to as a “date rape” drug. It is a sedative-hypnotic drug in the Benzodiazepine class. It often goes by the street name “roofies”.

Gamma-Hydroxybutyric Acid (GHB) – A depressant, also known as a “date rape” drug. GHB often goes by the street name “easy lay,” “scoop,” “liquid X,” “Georgia home boy” and “grievous bodily harm.”

Heroin – An illicit narcotic derivative. It is a semi-synthetic product of opium. Heroin also has multiple street names including “H,” “hombre” and “smack,” and others too numerous to mention.

Hydrocodone – A narcotic analgesic (pain killer). Vicodin and Lortab are two common drugs containing hydrocodone.

Hydromorphone – A narcotic analgesic (pain killer) used to treat moderate to severe pain. Marketed under the trade name Dilaudid, it is two to eight times more potent than morphine. Commonly used by abusers as a substitute for heroin.

Ketamine – An animal tranquilizer and a chemical relative of PCP. Street names for this drug include “special K,” “vitamin K” and “cat valium.”

Levamisole – A drug originally developed for use in treating cancer but discontinued for human use due to its negative effects on the human body. Generally found in the Philadelphia area as a cutting agent for cocaine.

Meperidine – A synthetic narcotic analgesic (pain killer) sold under the trade name Demerol, it is used for pre-anesthesia and the relief of moderate to severe pain.

Methadone – A synthetic narcotic analgesic (pain killer) commonly associated with Heroin detoxification and maintenance programs but it is also prescribed to treat severe pain. It has been increasingly prescribed in place of oxycodone for pain management. Dolophine is one form of methadone.

Hallucinogenic Phenethylamines/Piperazine – Includes such drugs as MDMA (Ecstasy, a hallucinogen), MDA (a psychedelic), MDEA (a psychedelic hallucinogenic) and Piperazine derivatives. Ecstasy has multiple street names including “E,” “XTC,” “love drug,” and “clarity.” MDMA is often also known by a large variety of embossed logos on the pills such as “Mitsubishis” and “Killer Bees.”

Hallucinogenic Tryptamines – Natural tryptamines are commonly available in preparations of dried or brewed mushrooms, while tryptamine derivatives are sold in capsule, tablet, powder, or liquid forms. Street names include “Foxy-Methoxy”, “alpha-O”, and “5-MEO.”

Morphine – A narcotic analgesic (pain killer) used to treat moderate to severe pain. MS (Morphine Sulfate), Kadian, and MS-Contin are the tablet forms; Roxanol is the liquid form.
Nitrous Oxide (N2O) – Also known as "laughing gas," this is an inhalant (gas) that produces light anesthesia and analgesia. “Whippets” are a common form of nitrous oxide.

Oxycodone – A narcotic analgesic (pain killer). OxyContin is one form of this drug and goes by the street name “OC.” Percocet, Percodan, Roxicet, Tylox, and Roxicodone also contain Oxycodone.

Oxymorphone – A narcotic analgesic (pain killer), that is often prescribed as Opana, Numorphan and Numorphine.

Phencyclidine (PCP) – An illicit dissociative anesthetic/hallucinogen. Common street names for this drug include “angel dust,” “ace,” “DOA” and “wack.”

Synthetic Cannabinoids – Synthetic cannabinoids are man-made chemicals that are applied (often sprayed) onto plant material to mimic the effect of delta-9-tetrahydrocannabinol (THC), the psychoactive ingredient in the naturally grown marijuana plant (cannabis sativa). Synthetic cannabinoids, commonly known as “synthetic marijuana”, “Spice” or “K2”, are often sold in retail outlets as “herbal incense” or “potpourri”, and are labeled “not for human consumption.”

Sympathomimetic Amines – A group of stimulants including phentermine (an appetite suppressant) and other sympathomimetic amines not tracked elsewhere in this report.

Tramadol – A synthetic narcotic analgesic sold under the trade name Ultram and Ultracet. Indications include the treatment of moderate to severe pain. It is a chemical analogue to Codeine. Not currently a scheduled drug.

Zolpidem – A prescription medication used for the short-term treatment of insomnia; it is commonly known as Ambien.
Number of Reported Drug Deaths by County, 2015
Number of Reported Drug Deaths by Region, 2015

- 196 Reported Deaths
  21.5 Deaths per 100,000 Population

- 114 Reported Deaths
  16.1 Deaths per 100,000 Population

- 458 Reported Deaths
  28.6 Deaths per 100,000 Population

- 886 Reported Deaths
  32.9 Deaths per 100,000 Population

- 340 Reported Deaths
  19.9 Deaths per 100,000 Population

- 1,511 Reported Deaths
  29.1 Deaths per 100,000 Population
Number of Reported Drug Deaths Per 100,000 Population by County, 2015

Statewide Average = 27.4 Deaths Per 100,000 Population

- No Deaths
- Above Statewide Average
- At or Below Statewide Average
- Less than 10 Deaths
Change in Number of Reported Drug Deaths from 2014 to 2015 by County
Number of Reported Drug Deaths
in Rural and Urban Pennsylvania County, 2015

- **Rural Counties**
  - 22.7 per 100,000
  - 777 Deaths (22%)

- **Urban Counties**
  - 29.1 per 100,000
  - 2,728 Deaths (78%)
OVERDOSES STATEWIDE BY SPECIFIC DRUGS

OPIOIDS

- oxycodone 34%
- methadone 19%
- dilaudid 7%
- morphine 0%
- tramadol 16%
- fentanyl 4%
- buprenorphine 3%
- oxymorphone 3%
- naloxone 10%
- hydromorphone 3%
- dihydrocodeine 1%
- naltrexone 0%

BENZODIAZEPINES

- clonazepam 22%
- alprazolam 41%
- lorazepam 5%
- diazepam 5%
- oxazepam 5%
- midazolam 0%
- temazepam 0%
**ANTIDEPRESSANTS**

- doxepin 4%
- citalopram 6%
- amitriptyline 11%
- trazodone 8%
- fluoxetine 10%
- bupropion 8%
- duloxetine 7%
- mitazapine 3%
- sertraline 6%

**ANTIHISTAMINES**

- diphenhydramine 60%
- hydroxyzine 28%
- doxylamine 5%
- chlorpheniramine 6%
- certirizine 1%

**ANTIPSYCHOTICS**

- quetiapine 66%
- clonazepine 4%
- olanzapine 5%
- alprazolam 21%
- riperidone 3%
- aripiprazole 1%
ANTICONVULSANTS
- Topiramate: 15%
- Lamotrigine: 18%
- Phentoin: 10%
- Gabapentin: 15%
- Pregabalin: 2%
- Levetiracetam: 7%
- Dextromethorphan: 3%

MUSCLE RELAXERS
- Carisoprodol: 78%
- Cyclobenzaprine: 19%
- Methocarbamol: 3%

BARBITUATES
- Butalbital: 55%
- Phenobarbital: 45%

HYPNOTICS
- Zolpidem: 98%
- Zaleplon: 2%
ILLEGAL DRUGS

- Heroin: 55%
- Cocaine: 26%
- Marijuana: 8%
- mCPP: 1%
- Levamisole: 6%
- Acetyl Fentanyl: 3%
- PCP: 1%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 30%
- Benzodiazepines: 18%
- Antidepressants: 11%
- Antihistamines: 4%
- Antipsychotics: 2%
- Anticonvulsants: 2%
- Muscle Relaxers: 3%
- Barbiturates: 1%
- Hypnotics: 1%
- Illegal Drugs: 1%
The charts shown on the previous pages show the prevalence of certain drugs, both legally prescribed and those that are considered to be illegal and having no known medical use for general human consumption. These drugs may have been legally prescribed for the person whose toxicology was tested or they may have been diverted from their original prescription holder for use by the end user. Hopefully with the implementation of the PMDP those answers may be more readily available.

In calculating the drug use by category, it should be noted that heroin was determined to be present when the Coroner/Medical Examiner listed heroin specifically in the toxicology, when morphine was present with its known metabolites of 6-monoacetylmorphine or codeine. When morphine was determined to be the only marker of the drug, it was assumed that morphine was present in that form as it is utilized in hospitals, hospices and other prescriptions. Not all persons with the drug morphine in their drug toxicology can be presumed to be using heroin without further evidence, as in its metabolites.

Similarly, it should be noted that amphetamines and methamphetamines were found in 227 instances in the toxicology. While these stimulants are found in illegal drugs such as meth and MDMA, they are also found in ADD or ADHD drugs. Therefore, it was not presumed that the presence of the drug was automatically the presence of an illegal form of the drug.

It should also be noted that 18% of the decedents also had alcohol detected in the toxicology.
Statewide Demographics

DEATHS BY TIME OF DAY

DEATHS BY WEEKDAY

DEATHS BY MONTH

GENDER

RACE

MARITAL STATUS
AGE

- <1: 21%
- 1-4: 26%
- 5-9: 23%
- 10-15: 21%
- 16-19: 7%
- 20-29: 0%
- 30-39: 1%
- 40-49: 0%
- 50-59: 0%
- 60-69: 0%
- 70+: 1%
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 13
- HIV: 14

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 74
- Alcohol Abuse: 55

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 6


PROBLEM SOLVING COURTS

- None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 10
- 2014: <10
ALLEGHENY

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 24
- Hep B Chronic: 304
- HIV: 378

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 3,301
- Alcohol Abuse: 1,428

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient non-hospital: 16
- Inpatient hospital: 1
- Partial Hospitalization: 21
- Outpatient: 54

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 6
- Physicians authorized to prescribe buprenorphine: 180
- Centers of Excellence: 2


PROBLEM SOLVING COURTS

- Adult Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 411
DEATHS BY DRUG CLASSIFICATION

- Opioids: 45%
- Benzodiazepines: 12%
- Anticonvulsants: 7%
- Antidepressants: 1%
- Muscle Relaxers: 1%
- Antihistamines: 1%
- Antipsychotics: 1%
- Barbituates: 0%
- Hypnotics: 0%
- Illegal: 0%
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE
DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: 5
- HIV: 5

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 221
- Alcohol Abuse: 163

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 2
- Partial Hospitalization: 1
- Outpatient: 4

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 3


PROBLEM SOLVING COURTS

- None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 28
- 2014: 17
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 16
- HIV: 17

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 405
- Alcohol Abuse: 234

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 5
- Partial Hospitalization: 2
- Outpatient: 6

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
- Physicians authorized to prescribe buprenorphine: 12


PROBLEM SOLVING COURTS

- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 35
BEDFORD

In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 7
- HIV: 6

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 95
- Alcohol Abuse: 65

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS: None

Physicians authorized to prescribe buprenorphine: 2


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: <10
- 2014: <10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 184
- HIV: 101

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 922
- Alcohol Abuse: 565

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 6
- Partial Hospitalization: 3
- Outpatient: 11

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
  - Physicians authorized to prescribe buprenorphine: 23
  - Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 69
- 2014: 64
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 18
- HIV: 9

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 473
- Alcohol Abuse: 275

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospitalization: 5
- Partial Hospitalization: 4
- Outpatient: 9

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
- Physicians authorized to prescribe buprenorphine: 13
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court
- Juvenile Drug Court
- Family Drug
- Re-entry Drug

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015: 38
2014: 21
BRADFORD

DEATHS BY TIME

DEATHS BY WEEKDAY

DEATHS BY MONTH

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 0
Hep B Chronic 9
HIV 5

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 100
Alcohol Abuse 84

TREATMENT FACILITIES (AS OF 6/13)

Partial Hospitalization 2
Outpatient 3

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None
Physicians authorized to prescribe buprenorphine 1


PROBLEM SOLVING COURTS

Adult Drug Court (hybrid)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 16
2014 11
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 9
- Hep B Chronic: 295
- HIV: 126

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 1,174
- Alcohol Abuse: 355

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 7
- Partial Hospitalization: 11
- Outpatient: 20

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 3
- Physicians authorized to prescribe buprenorphine: 47
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 123
- 2014: 205* (Included MVA, Homicides, Natural Deaths where drugs were found in the toxicology)
GENDER

- Female: 62%
- Male: 38%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 39%
- Benzodiazepines: 44%
- Antidepressants: 1%
- Muscle Relaxers: 2%
- Antihistamines: 3%
- Antipsychotics: 2%
- Anticonvulsants: 5%
- Illegal: 4%
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 5
- Hep B Chronic: 21
- HIV: 14

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 358
- Alcohol Abuse: 146

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 3
- Inpatient hospital: 1
- Partial Hospitalization: 2
- Outpatient: 8

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
  Physicians authorized to prescribe buprenorphine: 87


PROBLEM SOLVING COURTS

- Adult Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 48
- 2014: 33
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 28
- HIV: 17

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 604
- Alcohol Abuse: 215

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 3
- Partial Hospitalization: 2
- Outpatient: 7

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 12
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 57
- 2014: 37
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute <5  Hep B Chronic <5  HIV 0

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 36  Alcohol Abuse 17

TREATMENT FACILITIES (AS OF 6/13)

Outpatient 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None
Physicians authorized to prescribe buprenorphine 1


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 <10  2014 0
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 8
- HIV: 12

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 274
- Alcohol Abuse: 106

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 6


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 18
- 2014: 17
CENTRE

DEATHS BY WEEKDAY

DEATHS BY MONTH

AGE

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute <5
Hep B Chronic 104
HIV 18

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 218
Alcohol Abuse 313

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-Hospital 1
Outpatient 9

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS 1
Physicians authorized to prescribe buprenorphine 16
Centers of Excellence (Lycoming/Tioga/Clinton/Centre)


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 17
2014 18
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 149
- HIV: 85

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 559
- Alcohol Abuse: 590

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 5
- Partial Hospitalization: 3
- Outpatient: 16

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
  - Physicians authorized to prescribe buprenorphine: 28


PROBLEM SOLVING COURTS

- Adult Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 131
- 2014: 82
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: <5
- HIV: 4

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 133
- Alcohol Abuse: 92

**TREATMENT FACILITIES (AS OF 6/13)**

- Partial Hospitalization: 1
- Outpatient: 1

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

**METHADONE CLINICS** None

**Physicians authorized to prescribe buprenorphine** 2

**SOURCE:** PA DDAP 2015, SAMSHA July 2016

**PROBLEM SOLVING COURTS**

- Adult Drug Court (Hybrid)

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

- 2015: <10
- 2014: <10
### Health Profile

**Incidence of Communicable Disease Associated with Drug Use**
- Hep B Acute: <5
- Hep B Chronic: 49
- HIV: 3

**Admissions for Substance Abuse**
- Drug Abuse: 212
- Alcohol Abuse: 104

**Treatment Facilities (As of 6/13)**
- Outpatient: 5

**Source:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**Narcotic Treatment Programs**
- Methadone Clinics: 1
- Physicians authorized to prescribe buprenorphine: 3

**Source:** PA DDAP 2015, SAMSHA July 2016

**Problem Solving Courts**
- Adult Drug Court
- Juvenile Drug Court

**Source:** PA Unified Judicial System June 2016

**Drug Related Deaths**
- 2015: 14
- 2014: 15
CLINTON

In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Count</th>
</tr>
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<tbody>
<tr>
<td>Hep B Acute</td>
<td>0</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>5</td>
</tr>
<tr>
<td>HIV</td>
<td>3</td>
</tr>
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</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<table>
<thead>
<tr>
<th>Abuse Type</th>
<th>Count</th>
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<tbody>
<tr>
<td>Drug Abuse</td>
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<tr>
<td>Alcohol Abuse</td>
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</table>

TREATMENT FACILITIES (AS OF 6/13)

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
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</thead>
<tbody>
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<td>Outpatient</td>
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SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS

<table>
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<th>Type</th>
<th>Count</th>
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</thead>
<tbody>
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</table>

Physicians authorized to prescribe buprenorphine

<table>
<thead>
<tr>
<th>Count</th>
</tr>
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<tbody>
<tr>
<td>4</td>
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Centers of Excellence

| (Lycoming/Tioga/Clinton/Centre) |


PROBLEM SOLVING COURTS

<table>
<thead>
<tr>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Drug Court (Hybrid)</td>
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</table>

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>&lt;10</td>
</tr>
</tbody>
</table>
COLUMBIA

DEATHS BY TIME

DEATHS BY WEEKDAY

DEATHS BY MONTH

AGE

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute <5
Hep B Chronic 15
HIV 10

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 92
Alcohol Abuse 34

TREATMENT FACILITIES (AS OF 6/13)

Outpatient 4

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None
Physicians authorized to prescribe buprenorphine 3


PROBLEM SOLVING COURTS

Adult Drug Court (Columbia/Montour)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 16
CRAWFORD

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: 14
- HIV: 10

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 150
- Alcohol Abuse: 181

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- Methadone Clinics: 1
- Physicians authorized to prescribe buprenorphine: 6


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 28
- 2014: 16
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 97
- HIV: 34

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 302
- Alcohol Abuse: 247

TREATMENT FACILITIES (AS OF 6/13)

- Partial Hospitalization: 1
- Outpatient: 9

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 9


PROBLEM SOLVING COURTS

- Adult Drug Court (Hybrid)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 41
- 2014: 35
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 196
- HIV: 130

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 473
- Alcohol Abuse: 224

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 7
- Outpatient: 14

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 12
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court (Hybrid)
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 82
- 2014: 54
DELAWARE

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 5
- Hep B Chronic: 685
- HIV: 259

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 1,212
- Alcohol Abuse: 349

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 3
- Partial Hospitalization: 2
- Outpatient: 19

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
- Physicians authorized to prescribe buprenorphine: 60
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 208
- 2014: 149
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

<table>
<thead>
<tr>
<th>INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
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<td>Hep B Chronic</td>
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<td>HIV</td>
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<table>
<thead>
<tr>
<th>ADMISSIONS FOR SUBSTANCE ABUSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
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<table>
<thead>
<tr>
<th>TREATMENT FACILITIES (AS OF 6/13)</th>
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<td>Outpatient</td>
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SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

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<table>
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SOURCE: PA Unified Judicial System June 2016

<table>
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<th>DRUG RELATED DEATHS</th>
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</thead>
<tbody>
<tr>
<td>2015</td>
</tr>
<tr>
<td>2014</td>
</tr>
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</table>
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 58
- HIV: 35

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 693
- Alcohol Abuse: 403

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 6
- Inpatient Hospital: 2
- Partial Hospitalization: 1
- Outpatient: 16

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
  - Physicians authorized to prescribe buprenorphine: 23
  - Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court
- Family Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 68
- 2014: 60
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 13
- HIV: 16

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 386
- Alcohol Abuse: 320

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 3
- Partial Hospitalization: 1
- Outpatient: 6

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS: 2
- Physicians authorized to prescribe buprenorphine: 12


PROBLEM SOLVING COURTS

- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 40
- 2014: 40
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Count</th>
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ADMISSIONS FOR SUBSTANCE ABUSE

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<th>Abuse</th>
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<tbody>
<tr>
<td>Drug Abuse</td>
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TREATMENT FACILITIES (AS OF 6/13)

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<th>Facility Type</th>
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SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

<table>
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<tr>
<td>Physicians authorized to prescribe buprenorphine</td>
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</tbody>
</table>


PROBLEM SOLVING COURTS

Adult Drug Court
Juvenile Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>0</td>
</tr>
</tbody>
</table>
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 21
- HIV: 18

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 161
- Alcohol Abuse: 168

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-Hospital: 1
- Outpatient: 7

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 8


PROBLEM SOLVING COURTS

- None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>21</td>
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<tr>
<td>2014</td>
<td>14</td>
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</table>
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: 0
- HIV: 1

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 41
- Alcohol Abuse: 19

**TREATMENT FACILITIES (AS OF 6/13)**

- Outpatient: 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

- METHADONE CLINICS: None
  - Physicians authorized to prescribe buprenorphine: 1


**PROBLEM SOLVING COURTS**

- None

SOURCE: PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

- 2015: <10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute <5  
Hep B Chronic 26  
HIV 15

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 240  
Alcohol Abuse 167

TREATMENT FACILITIES (AS OF 6/13)

Partial Hospitalization 2  
Outpatient 4

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None  
Physicians authorized to prescribe buprenorphine 2


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 14  
2014 10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: <5
- HIV: 2

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 66
- Alcohol Abuse: 39

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
  - Physicians authorized to prescribe buprenorphine: 2


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 10
- 2014: <10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute   0
Hep B Chronic 27
HIV           6

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse  334
Alcohol Abuse 260

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-hospital  1
Partial Hospitalization 1
Outpatient              5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS   1
Physicians authorized to prescribe buprenorphine 11


PROBLEM SOLVING COURTS

Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015   36
2014   10
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

<table>
<thead>
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<th>HEALTH PROFILE</th>
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<tbody>
<tr>
<td>INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE</td>
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<tr>
<td>Hep B Acute</td>
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<tr>
<td>Hep B Chronic</td>
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<td>HIV</td>
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<td>ADMISSIONS FOR SUBSTANCE ABUSE</td>
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<tr>
<td>Drug Abuse</td>
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<td>Alcohol Abuse</td>
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<td>SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health</td>
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<td>NARCOTIC TREATMENT PROGRAMS</td>
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<td>METHADONE CLINICS</td>
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<td>Physicians authorized to prescribe buprenorphine</td>
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<td>PROBLEM SOLVING COURTS</td>
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<td>SOURCE: PA Unified Judicial System June 2016</td>
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<td>DRUG RELATED DEATHS</td>
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In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
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ADMISSIONS FOR SUBSTANCE ABUSE

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TREATMENT FACILITIES (AS OF 6/13)

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SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS

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Physicians authorized to prescribe buprenorphine

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<tr>
<th>Physicians</th>
<th>Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 <10
LACKAWANNA

**AGE**

- 20-29: 3%
- 30-39: 14%
- 40-49: 22%
- 50-59: 41%

**GENDER**

- Female: 69%
- Male: 31%

**DEATHS BY DRUG CLASSIFICATION**

- Opioids: 48%
- Anticonvulsants: 12%
- Benzodiazepines: 24%
- Antidepressants: 11%
- Antihistamines: 1%
- Illegal: 4%

*Drug listings incomplete.*

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: 71
- HIV: 43

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 524
- Alcohol Abuse: 406

**TREATMENT FACILITIES (AS OF 6/13)**

- Inpatient Non-hospital: 2
- Partial Hospitalization: 3
- Outpatient: 7

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

**METHADONE CLINICS**

- Physicians authorized to prescribe buprenorphine: 15
- Centers of Excellence: 1

**SOURCE:** PA DDAP 2015, SAMSHA July 2016, PA DHS July 2016

**PROBLEM SOLVING COURTS**

- Adult Drug Court
- Juvenile Drug Court
- Family Drug Court
- Co-occurring Court
- Veterans Court

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

<table>
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<th>Year</th>
<th>Number</th>
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<tr>
<td>2014</td>
<td>30</td>
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</table>
**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**
- Hep B Acute: <5
- Hep B Chronic: 224
- HIV: 104

**ADMISSIONS FOR SUBSTANCE ABUSE**
- Drug Abuse: 1,352
- Alcohol Abuse: 899

**TREATMENT FACILITIES (AS OF 6/13)**
- Inpatient Non-hospital: 8
- Partial Hospitalization: 3
- Outpatient: 20

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**
- **METHADONE CLINICS**: 1
- Physicians authorized to prescribe buprenorphine: 28
- Centers of Excellence: 1

**SOURCE:** PA DDAP 2015, SAMSHA July 2016, PA DHS July 2016

**PROBLEM SOLVING COURTS**
- Adult Drug Court
- Juvenile Drug Court

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**
- 2015: 80
- 2014: 56
MARITAL STATUS
- Single: 63%
- Married: 17%
- Divorced: 18%
- Widowed: 2%

RACE
- White: 73%
- Black: 17%
- Hispanic: 10%

DEATHS BY DRUG CLASSIFICATION
- Opioids: 50%
- Benzodiazepines: 19%
- Antidepressants: 3%
- Anticonvulsants: 1%
- Muscle Relaxers: 11%
- Antihistamines: 3%
- Illegal: 3%
**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: 13
- HIV: 7

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 439
- Alcohol Abuse: 193

**TREATMENT FACILITIES (AS OF 6/13)**

- Inpatient Non-Hospital: 1
- Outpatient: 5

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 9

**SOURCE:** PA DDAP 2015, SAMSHA July 2016

**PROBLEM SOLVING COURTS**

- Adult Drug Court

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

2015: 30
LEBANON

DEATHS BY WEEKDAY

DEATHS BY MONTH

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 0
Hep B Chronic 34
HIV 23

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 249
Alcohol Abuse 140

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-Hospital 2
Outpatient 4

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS 2
Physicians authorized to prescribe buprenorphine 4


PROBLEM SOLVING COURTS

Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 20
2014 15
AGE

20-29: 50%
30-39: 20%
40-49: 10%
50-59: 20%

GENDER

Female: 70%
Male: 30%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 40%
- Benzodiazepines: 21%
- Antidepressants: 19%
- Antihistamines: 8%
- Hypnotics: 4%
- Anticonvulsants: 4%
- Barbituates: 2%
- Illegal: 2%
**DEATHS BY TIME OF DAY**

- 8AM-4PM: 50
- 4PM-12AM: 30
- 12AM-8AM: 20

**DEATHS BY MONTH**

January: 10
February: 5
March: 15
April: 10
May: 12
June: 20
July: 25
August: 15
September: 10
October: 5
November: 10
December: 15

**DEATHS BY WEEKDAY**

- Sunday: 15
- Monday: 20
- Tuesday: 10
- Wednesday: 15
- Thursday: 25
- Friday: 10
- Saturday: 15

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: 8
- Hep B Chronic: 276
- HIV: 135

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 708
- Alcohol Abuse: 313

**TREATMENT FACILITIES (AS OF 6/13)**

- Inpatient Non-Hospitalization: 5
- Partial Hospitalization: 2
- Outpatient: 14

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 12
- Centers of Excelence: 1

**SOURCE:** PA DDAP 2015, SAMSHA July 2016

**PROBLEM SOLVING COURTS**

None

**SOURCE:** PA Unified Judicial System May 2016

**DRUG RELATED DEATHS**

- 2015: 115
- 2014: 88
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 31
- Hep B Chronic: 118
- HIV: 51

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 439
- Alcohol Abuse: 246

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 7
- Inpatient Hospital: 1
- Partial Hospitalization: 4
- Outpatient: 10

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
- Physicians authorized to prescribe buprenorphine: 38
- Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 96
- 2014: 67
**AGE**

- 10-15: 4%
- 16-19: 10%
- 20-29: 25%
- 30-39: 21%
- 40-49: 71%
- 50-59: 29%
- 60-69: 71%
- 70+: 21%

**GENDER**

- Female: 30%
- Male: 70%

**DEATHS BY DRUG CLASSIFICATION**

- Opioids: 40%
- Benzodiazepines: 21%
- Antidepressants: 19%
- Anticonvulsants: 4%
- Muscle Relaxers: 1%
- Antihistamines: 1%
- Antipsychotics: 1%
- Illegal: 1%
- Other: 1%
LYCOMING

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 26
- HIV: 15

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 240
- Alcohol Abuse: 167

TREATMENT FACILITIES (AS OF 6/13)

- Partial Hospitalization: 2
- Outpatient: 4

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
- Physicians authorized to prescribe buprenorphine: 14
- Centers of Excellence (Lycoming/Tioga/Clinton/Centre)


PROBLEM SOLVING COURTS

- Adult Drug Court
- Juvenile Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 25
- 2014: 13
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: <5
- HIV: 5

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 154
- Alcohol Abuse: 165

**TREATMENT FACILITIES (AS OF 6/13)**

- Inpatient Non-hospital: 1
- Inpatient Hospital: 1
- Outpatient: 5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

**METHADONE CLINICS**

- None

Physicians authorized to prescribe buprenorphine: 2


**PROBLEM SOLVING COURTS**

None

SOURCE: PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

- 2015: <10
- 2014: <10
DEATHS BY TIME

DEATHS BY WEEKDAY

DEATHS BY MONTH

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>&lt;5</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>17</td>
</tr>
<tr>
<td>HIV</td>
<td>8</td>
</tr>
</tbody>
</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<table>
<thead>
<tr>
<th>Substance Abuse</th>
<th>Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>143</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>118</td>
</tr>
</tbody>
</table>

TREATMENT FACILITIES (AS OF 6/13)

<table>
<thead>
<tr>
<th>Facility Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Non-Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient</td>
<td>6</td>
</tr>
</tbody>
</table>

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

<table>
<thead>
<tr>
<th>Program</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>METHADONE CLINICS</td>
<td>1</td>
</tr>
<tr>
<td>Physicians authorized to prescribe buprenorphine</td>
<td>12</td>
</tr>
</tbody>
</table>


PROBLEM SOLVING COURTS

<table>
<thead>
<tr>
<th>Court</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans</td>
<td></td>
</tr>
</tbody>
</table>

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>19</td>
</tr>
<tr>
<td>2014</td>
<td>27</td>
</tr>
</tbody>
</table>
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>0</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>7</td>
</tr>
<tr>
<td>HIV</td>
<td>3</td>
</tr>
</tbody>
</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<table>
<thead>
<tr>
<th>Abuse Type</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>23</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>25</td>
</tr>
</tbody>
</table>

TREATMENT FACILITIES (AS OF 6/13)

<table>
<thead>
<tr>
<th>Facility Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Non-hospital</td>
<td>1</td>
</tr>
<tr>
<td>Partial Hospitalization</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient</td>
<td>1</td>
</tr>
</tbody>
</table>

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Physicians authorized</td>
<td>6</td>
</tr>
<tr>
<td>to prescribe</td>
<td></td>
</tr>
<tr>
<td>buprenorphine</td>
<td></td>
</tr>
</tbody>
</table>

SOURCE: PA DDAP 2015, SAMSHA

PROBLEM SOLVING COURTS

<table>
<thead>
<tr>
<th>Court Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Drug Court</td>
<td></td>
</tr>
<tr>
<td>(Hybrid)</td>
<td></td>
</tr>
<tr>
<td>Juvenile Drug Court</td>
<td></td>
</tr>
</tbody>
</table>

SOURCE: PA Unified Judicial System

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>&lt;10</td>
</tr>
</tbody>
</table>
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute <5
Hep B Chronic 90
HIV 41

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 186
Alcohol Abuse 82

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Nonhospital 1
Partial Hospitalization 2
Outpatient 8

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOtic TREATMENT PROGRAMS

METHADONE CLINICS 1
Physicians authorized to prescribe buprenorphine 14


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 46
2014 39
GENDER

Female: 22%
Male: 78%

RACE

White: 96%
Black: 3%
Hispanic: 1%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 30%
- Benzodiazepines: 16%
- Antidepressants: 16%
- Anticonvulsants: 16%
- Antihistamines: 8%
- Hypnotics: 3%
- Illegal: 1%

- Opioids
- Benzodiazepines
- Antidepressants
- Anticonvulsants
- Antihistamines
- Hypnotics
- Illegal
**DEATHS BY WEEKDAY**

<table>
<thead>
<tr>
<th>Day</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sunday</td>
<td></td>
</tr>
<tr>
<td>Monday</td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
</tr>
</tbody>
</table>

**DEATHS BY MONTH**

<table>
<thead>
<tr>
<th>Month</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td></td>
</tr>
<tr>
<td>March</td>
<td></td>
</tr>
<tr>
<td>May</td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
</tr>
<tr>
<td>September</td>
<td></td>
</tr>
<tr>
<td>November</td>
<td></td>
</tr>
</tbody>
</table>

**AGE**

- 16-19: 12%
- 20-29: 21%
- 30-39: 23%
- 40-49: 20%
- 50-59: 19%
- 60-69: 3%
- 70+: 2%

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: <5
- Hep B Chronic: 529
- HIV: 156

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 708
- Alcohol Abuse: 287

**TREATMENT FACILITIES (AS OF 6/13)**

- Inpatient Non-hospital: 7
- Inpatient hospital: 2
- Partial Hospitalization: 4
- Outpatient: 31

**NARCOTIC TREATMENT PROGRAMS**

- Methadone Clinics: 6
- Physicians authorized to prescribe buprenorphine: 80
- Centers of Excellence: 1

**PROBLEM SOLVING COURTS**

- Adult Drug Court
- Veterans Court

**DRUG RELATED DEATHS**

- 2015: 171
- 2014: 161
GENDER

- Female: 63%
- Male: 37%

RACE

- White: 88%
- Black: 10%
- Hispanic: 2%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 35%
- Benzodiazepines: 23%
- Antidepressants: 21%
- Anticonvulsants: 6%
- Antihistamines: 4%
- Muscle Relaxers: 6%
- Antipsychotics: 2%
- Hypnotics: 2%
- Barbituates: 1%
DEATHS BY WEEKDAY

- Saturday
- Thursday
- Tuesday
- Saturday
- Sunday

GENDER

- Female: 33%
- Male: 67%

DEATHS BY MONTH

- November
- September
- July
- May
- March
- January

AGE

- 20-29: 8%
- 30-39: 17%
- 40-49: 33%
- 50-59: 34%
- 60-69: 8%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 44%
- Benzodiazepines: 33%
- Antidepressants: 6%
- Anticonvulsants: 6%
- Illegal: 11%

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 8
- HIV: 0

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 12
- Alcohol Abuse: 8

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 3


PROBLEM SOLVING COURTS

- None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 12
DEATHS BY TIME

DEATHS BY WEEKDAY

DEATHS BY MONTH

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 7
Hep B Chronic 112
HIV 37

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 398
Alcohol Abuse 253

TREATMENT FACILITIES (AS OF 6/13)

Partial Hospitalization 2
Outpatient 5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS 1
Physicians authorized to prescribe buprenorphine 16


PROBLEM SOLVING COURTS

Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 71
2014 28
DEATHS BY WEEKDAY

DEATHS BY MONTH

GENDER

DEATHS BY DRUG CLASSIFICATION

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 0
Hep B Chronic 20
HIV 4

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 121
Alcohol Abuse 37

TREATMENT FACILITIES (AS OF 6/13)

Outpatient 5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS 1
Physicians authorized to prescribe buprenorphine 3


PROBLEM SOLVING COURTS

Adult Drug Court
Juvenile Drug Court (Co-occurring) Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 16
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics. Also, all the county data for the less than 10 drug deaths has been compiled in charts following the individual county charts.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>0</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>19</td>
</tr>
<tr>
<td>HIV</td>
<td>3</td>
</tr>
</tbody>
</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<table>
<thead>
<tr>
<th>Substance</th>
<th>Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>97</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>78</td>
</tr>
</tbody>
</table>

TREATMENT FACILITIES (AS OF 6/13)

<table>
<thead>
<tr>
<th>Type</th>
<th>Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outpatient</td>
<td>1</td>
</tr>
</tbody>
</table>

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS: None

Physicians authorized to prescribe buprenorphine: None


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>&lt;10</td>
</tr>
</tbody>
</table>
PHILADELPHIA

DEATHS BY TIME

DEATHS BY WEEKDAY

DEATHS BY MONTH

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute  17
Hep B Chronic  1,084
HIV  2,056

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse  2,532
Alcohol Abuse  1,085

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-hospital  37
Inpatient Hospital  5
Partial Hospitalization  10
Outpatient  78

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS  16
Physicians authorized to prescribe buprenorphine  172
Centers of Excellence  3


PROBLEM SOLVING COURTS

Adult Drug Court
Juvenile Drug Court
Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015  702
2014  611
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: <5
- HIV: 1

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 65
- Alcohol Abuse: 25

TREATMENT FACILITIES (AS OF 6/13)

- Outpatient: 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: None


PROBLEM SOLVING COURTS

- Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: <10
- 2014: 0
SCHUYLKILL

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 7
- Hep B Chronic: 51
- HIV: 15

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 419
- Alcohol Abuse: 162

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-Hospital: 3
- Outpatient: 5

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 6


PROBLEM SOLVING COURTS

- None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 24
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: 7
- HIV: 0

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 45
- Alcohol Abuse: 19

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-Hospital: 2
- Outpatient: 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: None


PROBLEM SOLVING COURTS

- Adult Drug Court (Snyder/Union)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: <10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 0
Hep B Chronic 13
HIV 6

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 244
Alcohol Abuse 167

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-hospital 1
Partial Hospitalization 1
Outpatient 2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None
Physicians authorized to prescribe buprenorphine None


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 16
AGE

- 30-39: 44%
- 40-49: 12%
- 50-59: 38%
- 60-69: 6%

GENDER

- Female: 63%
- Male: 37%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 45%
- Benzodiazepines: 15%
- Antihistamines: 11%
- Anticonvulsants: 4%
- Antidepressants: 15%
- Barbituates: 2%
- Illegal: 8%
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute 0
Hep B Chronic 0
HIV 1

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse 2
Alcohol Abuse 3

TREATMENT FACILITIES (AS OF 6/13)

Outpatient 1

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS None
Physicians authorized to prescribe buprenorphine None


PROBLEM SOLVING COURTS

Adult Drug Court (Wyoming/Sullivan Hybrid)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015 None
2014 <10
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

| Hep B Acute | <5 |
| Hep B Chronic | <5 |
| HIV | 1 |

**Admissions for Substance Abuse**

| Drug Abuse | 47 |
| Alcohol Abuse | 36 |

**Treatment Facilities (as of 6/13)**

| Outpatient | 3 |

**Source:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**Narcotic Treatment Programs**

**Methadone Clinics**

| None |

**Physicians Authorized to Prescribe Buprenorphine**

| None |

**Source:** PA DDAP 2015, SAMSHA July 2016

**Problem Solving Courts**

| None |

**Source:** PA Unified Judicial System June 2016

**Drug Related Deaths**

| 2015 | <10 |
| 2014 | 12 |
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

<table>
<thead>
<tr>
<th>Disease</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>0</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>&lt;5</td>
</tr>
<tr>
<td>HIV</td>
<td>0</td>
</tr>
</tbody>
</table>

**ADMISSIONS FOR SUBSTANCE ABUSE**

<table>
<thead>
<tr>
<th>Abuse Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>71</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>19</td>
</tr>
</tbody>
</table>

**TREATMENT FACILITIES (AS OF 6/13)**

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Hospital</td>
<td>1</td>
</tr>
<tr>
<td>Partial Hospitalization</td>
<td>1</td>
</tr>
<tr>
<td>Outpatient</td>
<td>1</td>
</tr>
</tbody>
</table>

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

**METHADONE CLINICS** None

**Physicians authorized to prescribe buprenorphine** None

**Centers of Excellence** (Lycoming/Tioga/Clinton/Centre)

**SOURCE:** PA DDAP 2015, SAMSHA July 2016

**PROBLEM SOLVING COURTS**

None

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

<table>
<thead>
<tr>
<th>Year</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>&lt;10</td>
</tr>
</tbody>
</table>
UNION

In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>&lt;5</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>46</td>
</tr>
<tr>
<td>HIV</td>
<td>12</td>
</tr>
</tbody>
</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>32</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>21</td>
</tr>
</tbody>
</table>

TREATMENT FACILITIES (AS OF 6/13)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Non-hospital</td>
<td>2</td>
</tr>
<tr>
<td>Outpatient</td>
<td>3</td>
</tr>
</tbody>
</table>

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS

1 Physicians authorized to prescribe buprenorphine


PROBLEM SOLVING COURTS

Adult Drug Court (Snyder/Union)

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>&lt;10</td>
</tr>
<tr>
<td>2014</td>
<td>&lt;10</td>
</tr>
</tbody>
</table>
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 0
- Hep B Chronic: <5
- HIV: 2

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 231
- Alcohol Abuse: 147

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 2
- Partial Hospitalization: 2
- Outpatient: 6

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 4


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 11
- 2014: 10
GENDER

- Female: 50%
- Male: 50%

MARITAL STATUS

- Single: 46%
- Married: 27%
- Divorced: 27%

DEATHS BY DRUG CLASSIFICATION

- Opioids: 22%
- Anticonvulsants: 10%
- Benzodiazepines: 13%
- Antidepressants: 20%
- Antipsychotics: 5%
- Antihistamines: 5%
- Illegal: 25%
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute  0
Hep B Chronic  <5
HIV  0

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse  99
Alcohol Abuse  80

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Hospital  1
Outpatient  2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS  None
Physicians authorized to prescribe buprenorphine  1


PROBLEM SOLVING COURTS

Adult Drug Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015  None
2014  <10
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

<table>
<thead>
<tr>
<th>Disease</th>
<th>Incidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hep B Acute</td>
<td>&lt;5</td>
</tr>
<tr>
<td>Hep B Chronic</td>
<td>32</td>
</tr>
<tr>
<td>HIV</td>
<td>19</td>
</tr>
</tbody>
</table>

ADMISSIONS FOR SUBSTANCE ABUSE

<table>
<thead>
<tr>
<th>Substance</th>
<th>Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug Abuse</td>
<td>296</td>
</tr>
<tr>
<td>Alcohol Abuse</td>
<td>79</td>
</tr>
</tbody>
</table>

TREATMENT FACILITIES (AS OF 6/13)

<table>
<thead>
<tr>
<th>Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Non-hospital</td>
<td>5</td>
</tr>
<tr>
<td>Partial Hospitalization</td>
<td>5</td>
</tr>
<tr>
<td>Outpatient</td>
<td>6</td>
</tr>
</tbody>
</table>

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

<table>
<thead>
<tr>
<th>Program</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>METHADONE CLINICS</td>
<td>1</td>
</tr>
<tr>
<td>Physicians authorized to prescribe buprenorphine</td>
<td>33</td>
</tr>
<tr>
<td>Centers of Excellence</td>
<td>1</td>
</tr>
</tbody>
</table>


PROBLEM SOLVING COURTS

<table>
<thead>
<tr>
<th>Court</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Drug Court (Co-occurring)</td>
<td></td>
</tr>
<tr>
<td>Veterans Court</td>
<td></td>
</tr>
</tbody>
</table>

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

<table>
<thead>
<tr>
<th>Year</th>
<th>Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>73</td>
</tr>
<tr>
<td>2014</td>
<td>33</td>
</tr>
</tbody>
</table>
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

Hep B Acute  <5
Hep B Chronic  30
HIV  3

ADMISSIONS FOR SUBSTANCE ABUSE

Drug Abuse  141
Alcohol Abuse  115

TREATMENT FACILITIES (AS OF 6/13)

Inpatient Non-Hospital  1
Outpatient  2

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

METHADONE CLINICS  None
Physicians authorized to prescribe buprenorphine  2


PROBLEM SOLVING COURTS

None

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

2015  18
2014  14
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: <5
- Hep B Chronic: 43
- HIV: 18

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 415
- Alcohol Abuse: 183

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 2
- Partial Hospitalization: 6
- Outpatient: 11

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 2
  - Physicians authorized to prescribe buprenorphine: 45


PROBLEM SOLVING COURTS

- Adult Drug Court
- Family Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 126
- 2014: 87
AGE
- 1-4: 3%
- 16-19: 1%
- 20-29: 17%
- 23-29: 23%
- 30-39: 29%
- 40-49: 25%
- 50-59: 29%

GENDER
- Female: 62%
- Male: 38%

RACE
- White: 100%

MARITAL STATUS
- Single: 27%
- Married: 14%
- Divorced: 3%
- Widowed: 3%

DEATHS BY DRUG CLASSIFICATION
- Opioids: 24%
- Benzodiazepines: 14%
- Antidepressants: 27%
- Anticonvulsants: 6%
- Antihistamines: 8%
- Antipsychotics: 14%
- Muscle Relaxers: 0%
- Barbituates: 0%
- Hypnotics: 0%
In the effort to maintain best practices in de-identifying personal and potentially health related data, any quantification of the drug related deaths by age, gender, race, drugs and date is not provided. The complete data though is included in the calculation of the state-wide statistics.

**HEALTH PROFILE**

**INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE**

- Hep B Acute: 0
- Hep B Chronic: <5
- HIV: 1

**ADMISSIONS FOR SUBSTANCE ABUSE**

- Drug Abuse: 89
- Alcohol Abuse: 59

**TREATMENT FACILITIES (AS OF 6/13)**

- Partial Hospitalization: 1
- Outpatient: 1

**SOURCE:** Pennsylvania and County Health Profiles 2015, PA Department of Health

**NARCOTIC TREATMENT PROGRAMS**

- METHADONE CLINICS: None
- Physicians authorized to prescribe buprenorphine: 1

**SOURCE:** PA DDAP 2015, SAMSHA July 2016

**PROBLEM SOLVING COURTS**

- Adult Drug Court (Wyoming/Sullivan)

**SOURCE:** PA Unified Judicial System June 2016

**DRUG RELATED DEATHS**

- 2015: <10
- 2014: 17
HEALTH PROFILE

INCIDENCE OF COMMUNICABLE DISEASE ASSOCIATED WITH DRUG USE

- Hep B Acute: 9
- Hep B Chronic: 120
- HIV: 83

ADMISSIONS FOR SUBSTANCE ABUSE

- Drug Abuse: 697
- Alcohol Abuse: 379

TREATMENT FACILITIES (AS OF 6/13)

- Inpatient Non-hospital: 4
- Partial Hospitalization: 3
- Outpatient: 18

SOURCE: Pennsylvania and County Health Profiles 2015, PA Department of Health

NARCOTIC TREATMENT PROGRAMS

- METHADONE CLINICS: 1
  - Physicians authorized to prescribe buprenorphine: 22
  - Centers of Excellence: 1


PROBLEM SOLVING COURTS

- Adult Drug Court
- Juvenile Drug Court
- Veterans Court

SOURCE: PA Unified Judicial System June 2016

DRUG RELATED DEATHS

- 2015: 99
- 2014: 120
GENDER
- Female: 61%
- Male: 39%

RACE
- White: 90%
- Black: 8%
- Hispanic: 2%

MARITAL STATUS
- Single: 11%
- Married: 77%
- Divorced: 12%

DEATHS BY DRUG CLASSIFICATION
- Opioids: 28%
- Benzodiazepines: 27%
- Anticonvulsants: 15%
- Antidepressants: 15%
- Muscle Relaxers: 15%
- Antihistamines: 7%
- Antipsychotics: 4%
- Illegal: 2%
- Unknown: 2%
More needs to be done. Drug deaths represent approximately 10 percent of the drug abuse issue. Until hospitals, EMS, poison control centers, 911 call centers, law enforcement and all who prescribe and administer Narcan report on drug overdoses where the person survives, and on the judicial results of those who sell drugs, we are doing nothing more than establishing a drug policy which deals with drug use “one grave at a time.”

“The world is a dangerous place to live; not because of the people who are evil, but because of the people who don’t do anything about it.” Albert Einstein