

Drug-Related Deaths in the UK - Annual Report 2008

Increase in the number of Drug-Related Deaths

The Annual Report

The National Programme on Substance Abuse Deaths (np-SAD) has published its latest annual report on drug-related deaths in the UK. As in previous years, the data and analysis in this report is intended to inform authorities at the local, regional and national levels, as well as health professionals and the general public, about the serious consequences of drug abuse. The report provides also a number of indicators of drug abuse patterns, trends and early warnings on emerging drug problems so that appropriate and timely action can be taken.

The National Programme on Substance Abuse Deaths (np-SAD) is managed within the overall structure of the International Centre for Drug Policy within the Division of Mental Health, St. George's, University of London.

The Programme's principal aim is to contribute to the reduction and prevention of drug-related deaths in the UK due to the misuse of drugs, both licit and illicit, by collecting, analysing and disseminating information on the extent and nature of death.

This report was commissioned by the Department of Health.

Key points

The main findings reported in this year's Annual Report are:

- ◆ Notifications of 1,539 drug-related deaths occurring in 2007 were received by the Programme. A total of 107 coroners from 115 jurisdictions in England & Wales, as well as from Northern Ireland, the Channel Islands and Isle of Man, together with one Procurator Fiscal from Scotland, provided data. The total number of drug-related deaths (DRDs) reported in 2007 indicates an increase of 12.7% over the number reported 1,366 in the previous Annual Report.
- ◆ When the figures derived from data provided by the Scottish Crime and Drug Enforcement Agency and the Northern Ireland Statistics and Research Agency are included, the total number of drug-related deaths (DRDs) reported in 2007 for the UK is 1,900. This represents an increase of 8.4% in the number reported by the same sources in 2006 (1,752).
- ◆ The demographic profile of fatalities reported to the np-SAD remains consistent with previous reports. The majority of cases were males (77%), under the age of 45 years (71%), and White (95%).
- ◆ The principal underlying cause(s) of death were: accidental poisoning (63%); intentional self-poisoning (13%); and poisoning of undetermined intent (12%).
- ◆ Opiates/opioids (i.e. heroin/morphine; methadone; other opiates/opioid analgesics), alone or in combination with other drugs, accounted for the majority (71%) of all np-SAD cases.
- ◆ Heroin/morphine alone or in combination with other drugs, accounted for the highest proportion (48%) of fatalities, a slight increase over the 2006 level of 46%.

- ◆ The highest rates of DRDs per 100,000 population aged 16 and over in 2007 were in Dumbarton (20.6); Brighton & Hove (18.8); Blackpool & the Fylde (14.9); and Peterborough (10.1). Two of these areas, (Dumbarton and Peterborough) showed a significant increase over 2006, whilst Brighton & Hove exhibited only a small increase. There was a significant decline in the DRD rate in Blackpool & the Fylde.
- ◆ The following jurisdictions reported significantly lower rates per 100,000 population aged 16 and over than in the previous year: North & West Cumbria (11.4 to 4.5, from 25 to 10 cases); South Manchester (3.5 to 0.9, from 20 to 5 cases); Gateshead & North Tyneside (5.0 to 0.4, from 14 to one case); Exeter & Greater Devon (4.5 to 2.6, from 22 to 11 cases); Swansea (6.5 to 0.5, from 12 to 1 case); Plymouth & South West Devon (8.0 to 3.7, from 19 to 9 cases); Blackpool & the Fylde (19.4 to 14.9, from 35 to 27 cases); and Southampton & New Forest (7.4 to 4.7, from 24 to 16).
- ◆ The following jurisdictions reported significantly higher rates per 100,000 population aged 16 & over than in the previous year: Greater Norfolk (2.3 to 7.0, from 14 to 44 cases); Northern London (2.7 to 5.1, from 29 to 54 cases); West Yorkshire Eastern (4.7 to 7.3, from 40 to 65 cases); Northamptonshire (0.6 to 4.6, from 3 to 25 cases); Preston & Western Lancashire (2.5 to 6.1, from 14 to 35 cases); Cornwall (3.5 to 8.0, from 15 to 35 cases); Cheshire (2.4 to 4.7, from 19 to 38 cases); Suffolk (3.0 to 6.1, from 17 to 35 cases); South Staffordshire (1.0 to 4.3, from 5 to 21 cases); and City of Manchester (2.8 to 5.9, from 10 to 22 cases).
- ◆ The following perceptible changes were also observed:
 - The proportion of cases involving methadone increased from 17% to 20%; the number of such cases increased from 264 to 295 cases.
 - The proportion of cases involving cocaine increased from 11% to 16%; the number of such cases increased from 174 to 239 cases.
 - The proportion of cases involving hypnotics/sedatives increased from 17% to 21%; the number of such cases increased from 259 to 309 cases.
 - The proportion of cases involving alcohol in combination with other substances increased from 34% to 38%; the number of such cases increased from 525 to 554 cases.

This year's report includes an in-depth consideration of the role of cocaine in drug-related deaths. The number of deaths notified to the np-SAD in which cocaine was implicated has almost doubled between 2004 and 2007, from 128 to 239. Furthermore, the proportion of all cases in which the cocaine was implicated also rose, from 10% to 16%.

In commenting on the above data, Professor Hamid Ghodse, Director of the International Centre for Drug Policy, St George's, University of London, said: "The findings of this report demonstrate the need for continued vigilance and constant monitoring of the drug-related deaths situation to ensure that the reasons for such trends are understood so that appropriate measures and interventions can be put in place to prevent avoidable deaths and save lives. I would like to thank the Department of Health for their continued support for this very important Programme".

Ordering copies

Electronic copies of the report "Drug-Related Deaths in the UK - Annual Report 2008" are available from:

National Programme on Substance Abuse Deaths,
International Centre for Drug Policy,
St George's, University of London,
Cranmer Terrace
London SW17 0RE.

Copies of some earlier Annual Reports as well as six-monthly surveillance reports are still available for purchase.

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