

As the War on Drugs Relentlessly Grinds On, Overdose Deaths Relentlessly Mount

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When the Centers for Disease Control and Prevention <u>announced</u> last January that drug overdoses in 2018 declined by 4.1 percent–from 70,237 in 2017 to 67,367 in 2018–many in the <u>press</u> took that as a sign of possible progress in America's longest war, the war on drugs. However, a deeper look at the data painted a very different picture.

The CDC report stated:

The age-adjusted rate of drug overdose deaths involving synthetic opioids other than methadone, which include drugs such as fentanyl, fentanyl analogs, and tramadol, increased from 0.3 per 100,000 standard population in 1999 to 1.0 in 2013, 1.8 in 2014, 3.1 in 2015, 6.2 in 2016, 9.0 in 2017, and 9.9 in 2018. The rate of drug overdose deaths involving heroin increased from 0.7 in 1999 to 1.0 in 2010, then increased to 4.9 in 2016 and 2017. The rate in 2018 (4.7) was lower than in 2017. The rate of drug overdose deaths involving natural and semisynthetic opioids, which include drugs such as oxycodone and hydrocodone, increased from 1.0 in 1999 to 3.1 in 2009, then increased to 4.4 in 2016 and 2017. The rate in 2018 (3.8) was lower than in 2017... The age-adjusted rate of drug overdose deaths involving cocaine increased from 1.4 per 100,000 standard population in 1999 to 2.5 in 2006, then decreased to 1.3 in 2010 and 1.5 in 2011. From 2012 through 2018, the rate increased on average by 27% per year to a rate of 4.5 in 2018. The age-adjusted rate of drug overdose deaths involving psychostimulants with abuse potential, which include drugs such as methamphetamine, amphetamine, and methylphenidate, increased from 0.2 in 1999 to 0.8 in 2012. From 2012 through 2018, the rate increased on average by 30% per year to a rate of 3.9 in 2018.

While deaths attributed to prescription opioids continued to decline, deaths attributed to heroin overdoses leveled off, and those attributed to fentanyl and its analogs continued to increase. Also making a big comeback were deaths related to psychostimulants, such as cocaine and methamphetamine. These data should have been enough evidence to prevent policymakers from cracking open the champagne bottles.

The CDC recently issued its <u>preliminary report</u> on 2019 overdose deaths and the news isn't good. There were roughly 71,000 overdose deaths, <u>a new record</u>. These data predate the COVID-19 crisis, so we can expect matters to get even <u>worse</u>.

Speaking to reporters about the preliminary report, Robert Anderson, who oversees the mortality data for the CDC said, "We got it to stall out a bit. Now we need to grab on again and not let this get away from us."

This should come as no surprise. A 2018 <u>study</u> by researchers at the University of Pittsburgh found overdose deaths have been growing exponentially since at least the late 1970s and show no sign of deviating from the trend line. The particular drug predominating as the cause of death has changed from time to time, but the death rate marches on relentlessly. Therefore, even if the aggregate overdose data "stalled" a bit in 2018, the underlying forces fueled by dangerous black market drugs that result from drug prohibition continue unabated.

One bright spot in the preliminary data: overdoses declined in Vermont, Massachusetts, New York, New Hampshire, and Rhode Island—states where <u>harm reduction</u> strategies have gained some traction.

Until drug prohibition ends expect overdoses to continue following the tragic trendline.

Jeffrey A. Singer, MD received his BA from Brooklyn College and his MD from New York Medical College. After completing his surgical residency and receiving Board Certification he began a private practice as a general surgeon in Phoenix, Arizona and became a Fellow of the American College of Surgeons. He is a Senior Fellow at the Cato Institute in Washington, DC, serving in the Department of Health Policy Studies. He is also a Visiting Fellow at the Goldwater Institute in Phoenix, AZ. His principal areas of scholarship are health care policy, drug policy, drug prohibition, and harm reduction. Dr. Singer has been practicing medicine for more than 30 years.