

MEDIA RELEASE

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Drug deaths – communities in crisis

The Victorian Alcohol and Drug Association (VAADA) is highly concerned with the continuing high trends in drug deaths in Victoria, following the release of acute drug toxicity deaths data for the first half of 2013 by the Victorian Coroner's Court. This data also provides a 'drug death rate' by Medicare Local and also by some local government areas.



Drug Deaths: January – June 2013

There were 176 acute drug toxicity deaths in the first half of 2013;

- A high prevalence of pharmaceutical contributions (present in 82.4% of these deaths);
- Illegal drug contributions have increased slightly, from 35.7% in 2012 to 43.8% of drug deaths;
- Alcohol contributions have also increased, from 21.8% in 2012 to 30.1% of drug deaths;
- Benzodiazepines overtook pharmaceutical opioids as the most prevalent substance, and diazepam (a benzodiazepine) has for the second year contributed to more deaths than heroin; and
- 45% of the deceased had a recorded history of injecting substance use, 12% had a recorded history of substance use (but not intravenous) and 43% had no recorded history of substance use.

Sam Biondo, Executive Officer of VAADA says, 'sadly the 2013 drug death rate is on track to match previous years. Disturbingly, even though there is a general sense of less heroin use over the past decade, injecting substance use is still prevalent, with a history of injecting drug use evident with at least 45% of those who died in 2013.'

Drug death rate: metropolitan and regional Victoria: 2010 - 2012

A representative of the Coroners Court of Victoria presented this new data at a joint event hosted by the Yarra Drug and Health Forum and Inner North West Melbourne (INWM) Medical Local; this data features an acute drug toxicity death rate per 100,000 head of population over the three years from 2010 – 2012:

- Metropolitan Melbourne: 18.3 acute drug toxicity deaths per 100,000 head of population
- Regional Victoria: 20 acute drug toxicity deaths per 100,000 head of population

Mr Biondo says, 'it is highly concerning that the death rate in rural Victoria is higher than the metropolitan region; this is likely exacerbated by the scarcity of resources and overburdened health and welfare services in these regions. Alcohol and other drug treatment is proven to reduce overdose deaths; regional areas of Victoria are experiencing significant issues accessing treatment which reduces harms such as pharmacotherapy and this lack of servicing would increase the death rate'.

Drug death rate: by Medicare Local

This data also provides confirmation on what was already widely speculated by experts being that INWM Medicare Local (which encapsulates the suburbs such as Richmond, Collingwood and Fitzroy) has the highest drug death rate in Victoria (33.9:100000) with the Frankston-Mornington Peninsula Medicare Local maintaining the second highest drug death rate (25.4:100000), followed closely by Bayside (23.7:100000).

Mr Biondo says, 'Medicare Locals have an opportunity to use this data to tailor their services to addressing the specific causes of drug deaths in their respective catchments'.

Drug Death Rate: by local government area

Breaking it down further to local government areas reveals a silent crisis (death rate for 2010-2012 by LGA):

Local government area	Population/number of drug deaths	Death rate- metro (average: 18.3)
City of Yarra (INWM Medicare Local)	78,903/56	71
Port Phillip (Bayside Medicare Local)	97,276/60	61.7
Melbourne (INWM Medicare Local)	100,240/55	54.9

Mr Biondo says, 'this data provides much needed insight into alcohol and other drug harms by region and therefore allows for tailored responses for each region. For instance, INWM Medicare Local has by far the highest prevalence of illegal drug mortality which would suggest the need for targeted interventions. Mr Biondo continues, 'specifically, the City of Yarra maintains an unacceptably high death rate of 71 (50 plus above the average). Increasing access to needle and syringe programs and tacking supervised injecting capacity to local agencies would drive down these deaths. Supervised injecting would need to cater for contemporary needs, which may potentially involve responding to a range of drugs beyond opioids.'

Mr Biondo continues, 'this data provides a window to pockets of population at dramatic risk. This data should be heeded with local responses developed to address these risks. Increased access to pharmacotherapy, NSP, pain management and safe injecting are key to driving down these deaths. Greater alcohol and other drug treatment should also be provided for at risk regions. At a broader level, the government must introduce a real time prescription monitoring system to reduce the harms associated with pharmaceutical misuse.'

VAADA is the peak body that represents over 100 Alcohol and other Drug services across Victoria. On a daily basis these services are dealing with the effects of harmful alcohol and other drug consumption.

For more information or to arrange an interview please contact Sam Biondo on 0414 974 121 for comment or if unavailable, David Taylor on 0413 914 206.