Methamphetamine in New Mexico

Overdose Deaths

Hospitalizations

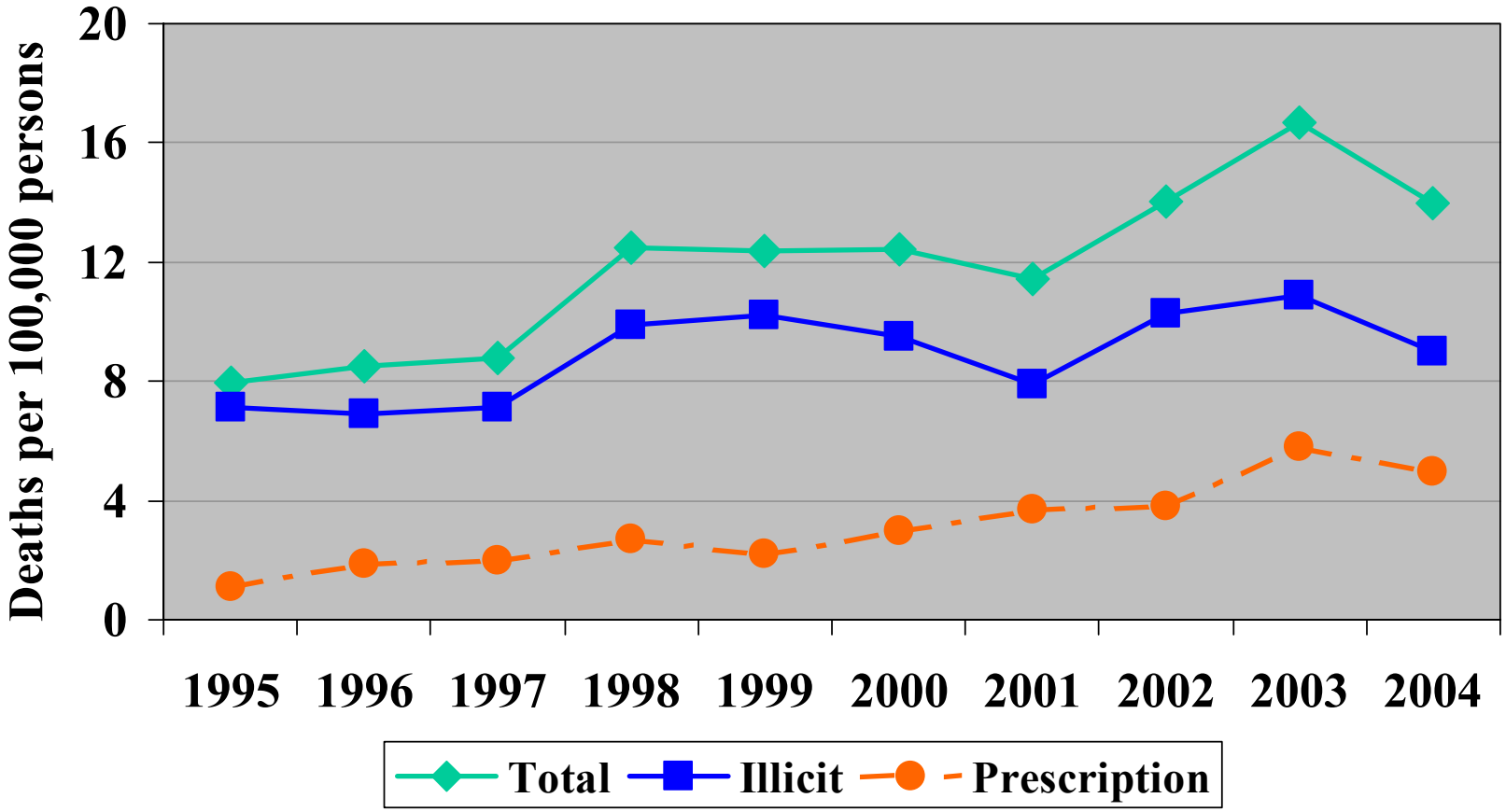
Youth Risk and Resiliency Survey

Treatment Episode Data Set

Arrestee Drug Abuse Monitoring Study

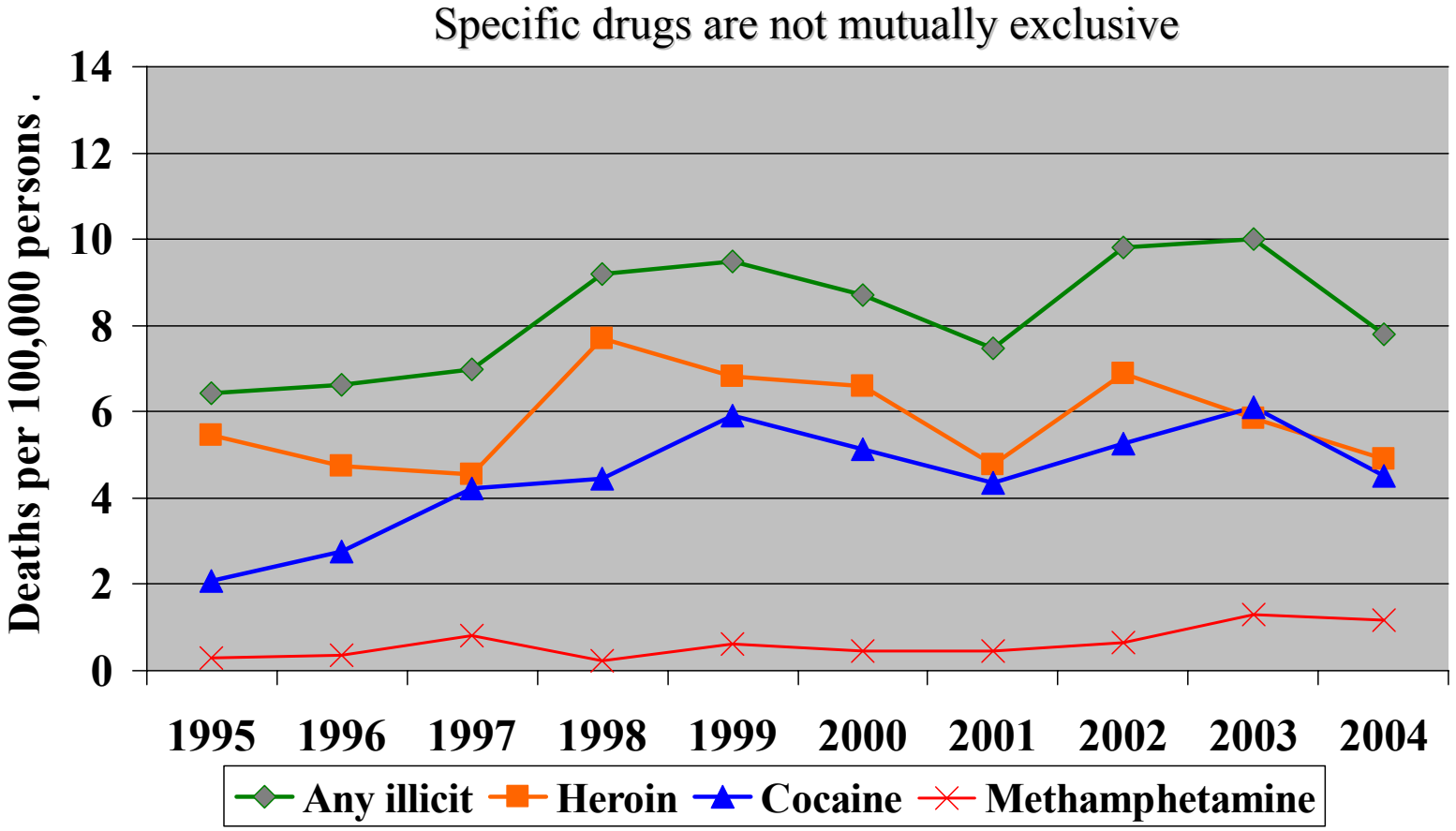
NEW MEXICO
DEPARTMENT OF
HEALTH

Unintentional Overdose Death Rates from Prescription and Illicit Drugs, New Mexico, 1995-2004



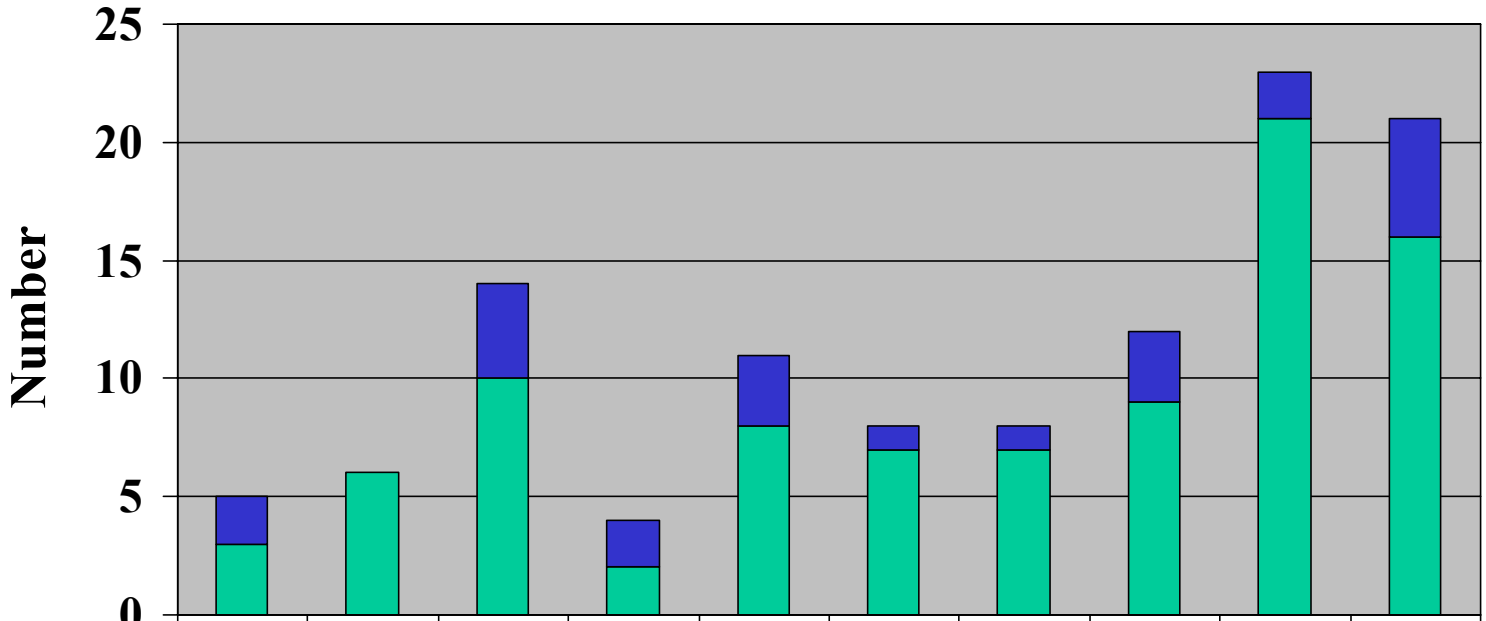
Note: Type of drug overdose death defined by OMI pathologists
Source: Office of the Medical Investigator
Rates are age-adjusted to the 2000 US Standard Population.

Unintentional Overdose Death Rates from Illicit Drugs, New Mexico, 1995-2004



Source: The New Mexico Office of the Medical Investigator
Rates are age-adjusted to the 2000 US Standard Population.

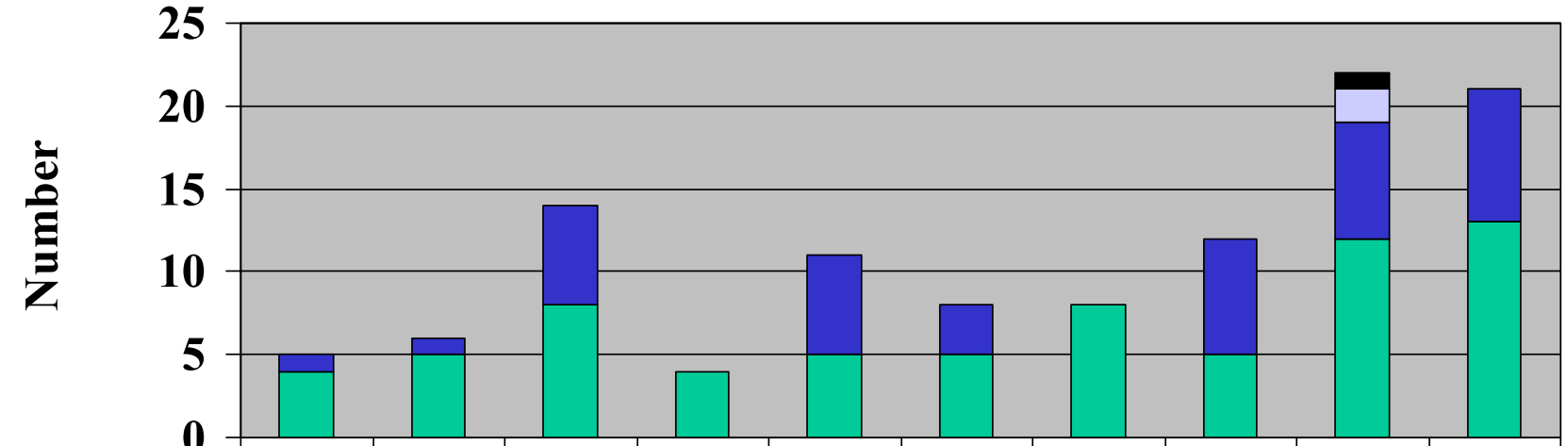
Number of Unintentional Methamphetamine Overdose Deaths by Sex, New Mexico, 1995-2004



	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Female	2	0	4	2	3	1	1	3	2	5
Male	3	6	10	2	8	7	7	9	21	16

Source: The New Mexico Office of the Medical Investigator

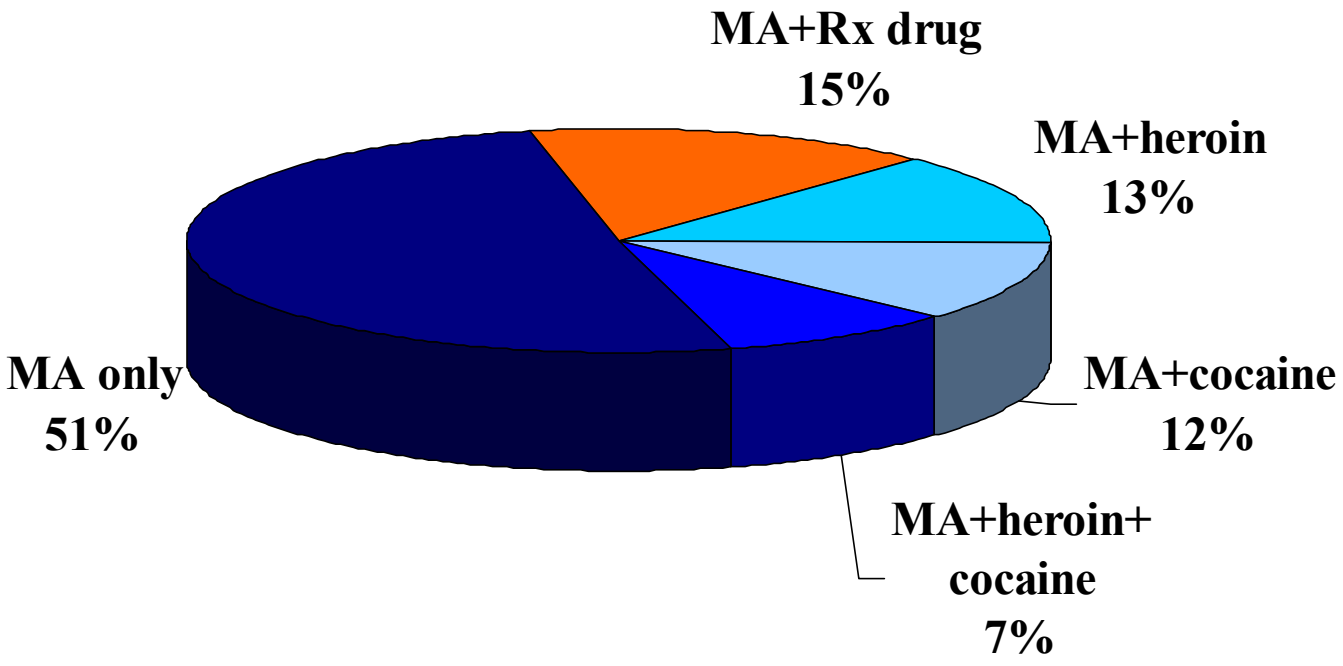
Number of Unintentional Methamphetamine Overdose Deaths by Race/Ethnicity, New Mexico, 1995-2004



	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004
Black									1	
AI/AN									2	
Hispanic	1	1	6	0	6	3	0	7	7	8
White	4	5	8	4	5	5	8	5	12	13

Source: The New Mexico Office of the Medical Investigator

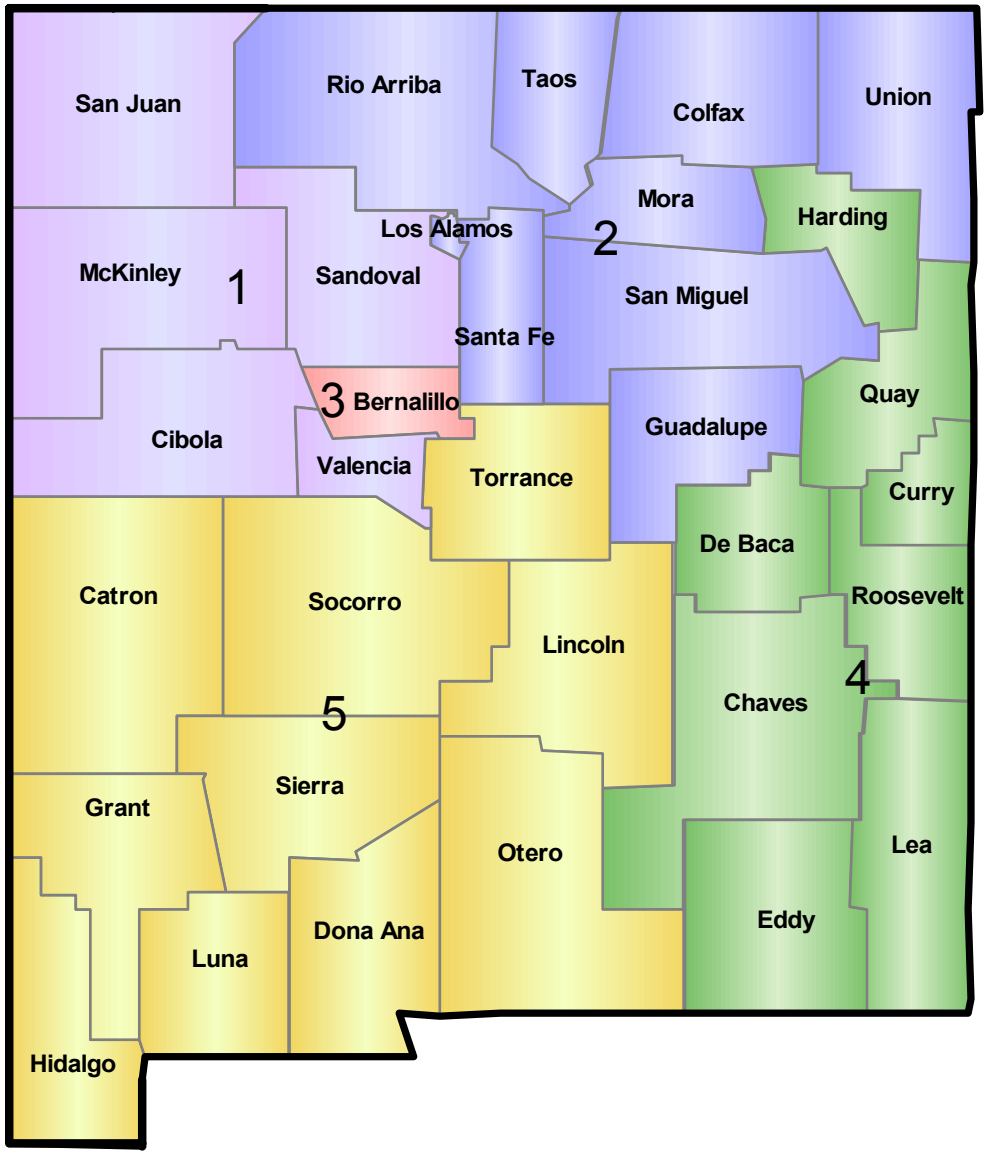
Unintentional Methamphetamine Overdose Deaths and Other Drugs Causing Death, New Mexico, 1995-2004



n=112 MA overdose deaths from 1995-2004

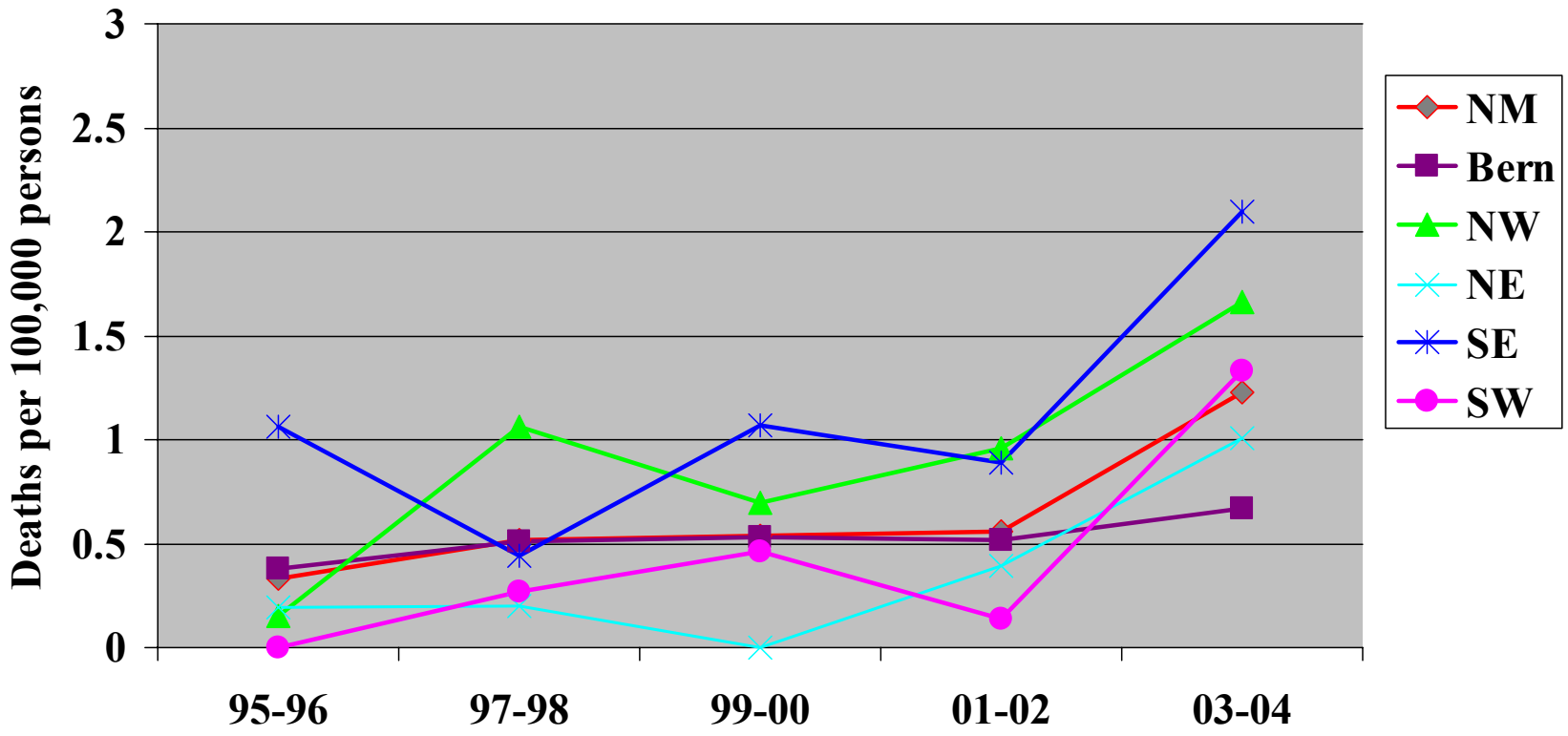
Source: The New Mexico Office of the Medical Investigator

New Mexico Health and Human Services Planning Regions



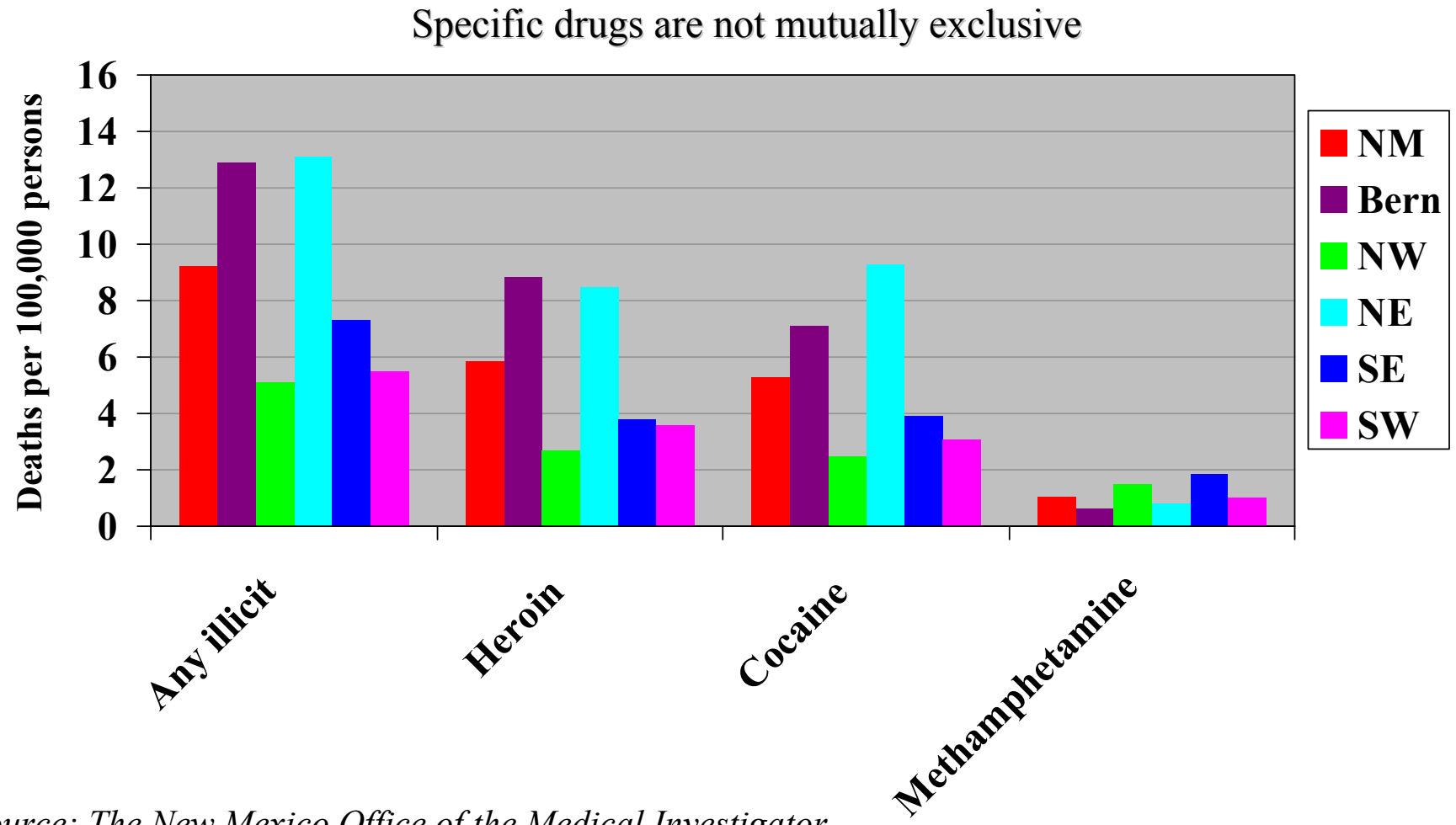
Effective July 1, 2005

Unintentional Methamphetamine Overdose Death Rates, New Mexico and Regions, 1995-2004



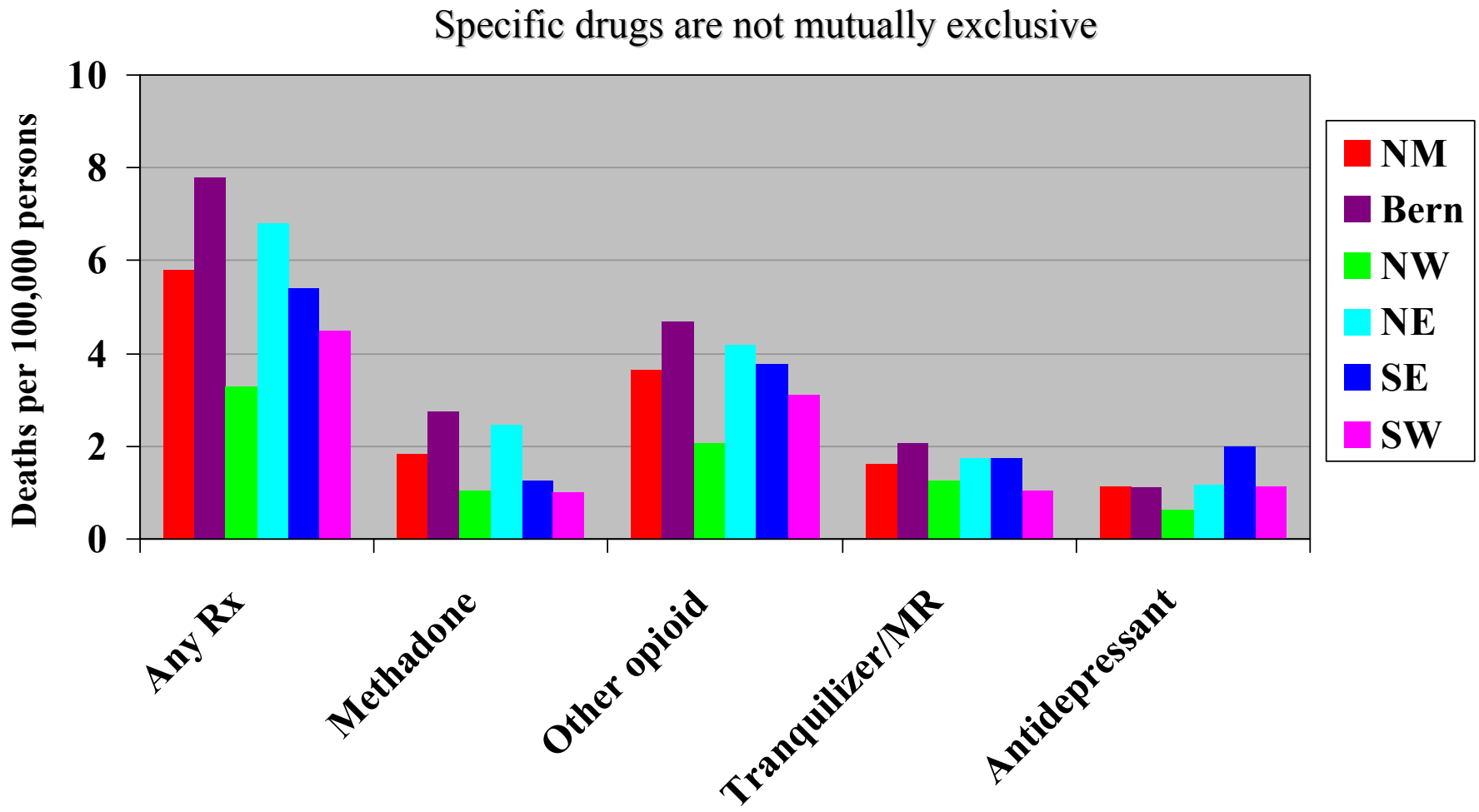
Source: The New Mexico Office of the Medical Investigator
Rates are age-adjusted to the 2000 US Standard Population.

Overdose Death Rates by Types of Illicit Drugs Causing Death, New Mexico and Regions, 2002-2004



Source: The New Mexico Office of the Medical Investigator
Rates are age-adjusted to the 2000 US Standard Population.

Overdose Death Rates by Types of Prescription Drugs Causing Death, New Mexico and Regions, 2002-2004



Source: The New Mexico Office of the Medical Investigator
Rates are age-adjusted to the 2000 US Standard Population.

Regional Death Rate Ratios by Types of Drugs Causing Overdose Death, New Mexico, 2002-2004

		Region (% of total NM population)				
		NW (21%)	**NE (15%)**	**Bern (31%)**	**SE (13%)**	**SW (20%)**
	Total drug overdose	0.59	1.26	2.10	0.82	0.66
	Any illicit drug overdose	0.53	1.54	2.19	0.74	0.56
	Any Rx drug overdose	0.54	1.20	2.01	0.89	0.76
illicit	Heroin	0.43	1.56	2.51	0.59	0.58
illicit	Cocaine	0.44	2.02	2.00	0.69	0.55
illicit	Methamphetamine	**1.68**	0.75	0.62	**1.90**	0.96
Rx	Methadone	0.55	1.43	2.41	0.63	0.51
Rx	Other opioid	0.54	1.17	1.85	0.99	0.85
Rx	Tranquilizer/MR	0.79	1.08	1.83	1.03	0.61
Rx	Antidepressant	0.53	1.05	1.19	1.86	1.05
	Alcohol and drug overdose	0.52	1.60	2.10	0.63	0.64

Unintentional deaths from drug poisoning by urbanization of area – New Mexico, 1994-2003

- Drug poisoning death rates differed by urbanization level (defined using the 2003 Office of Management and Budget classification for Statistical Areas)

- The poisoning death rate from opioids other than methadone (i.e., oxycodone, hydrocodone) were highest in non-SA (rural) counties

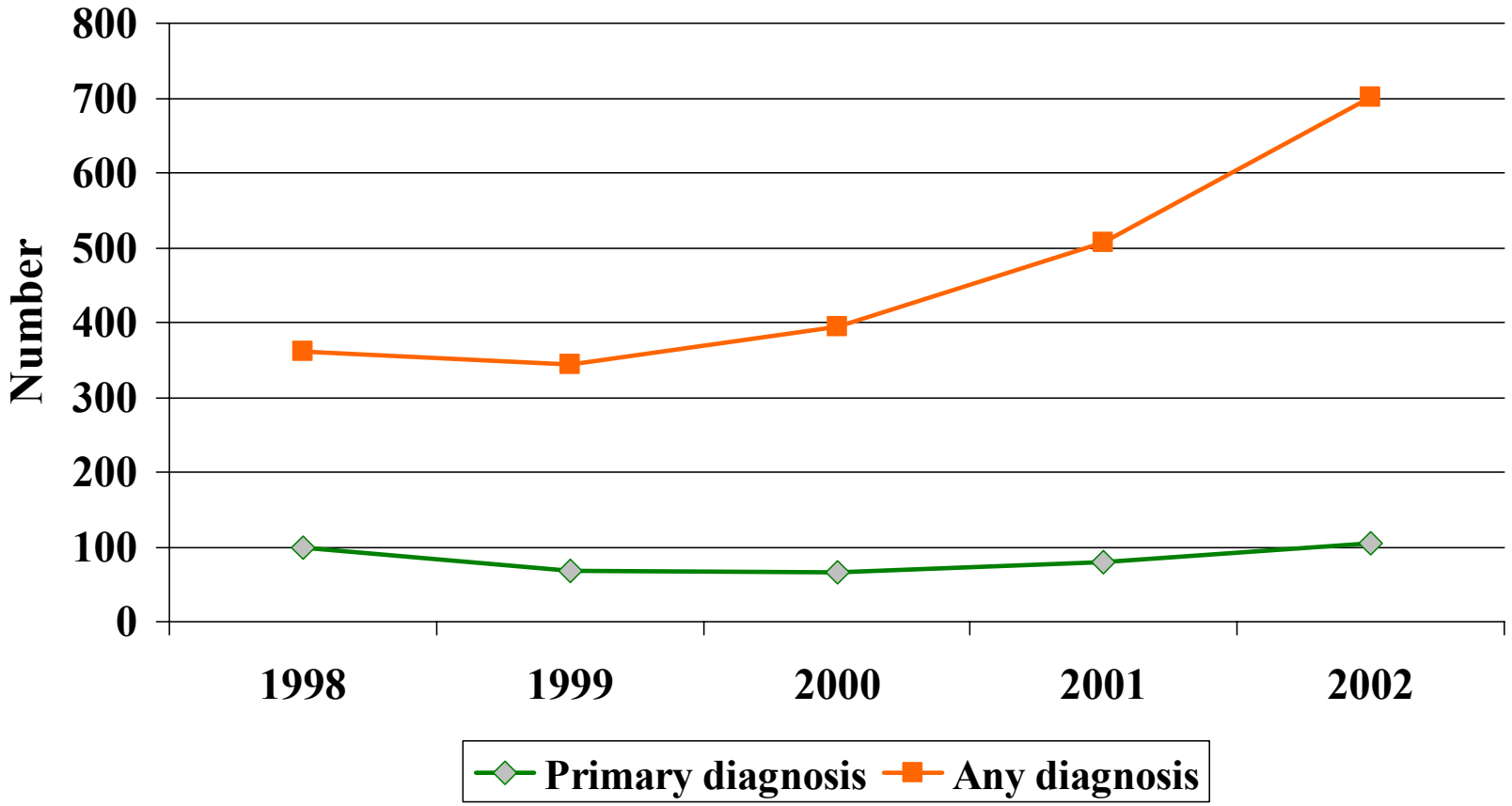
- Among all decedents from drug poisoning (adjusted for decedent and regional characteristics), poisoning death from:
  - Illicit drugs was most likely in metropolitan (large urban) SAs
  - Prescription drugs was most likely in micropolitan (small urban) and non-SAs

  - Bivariate association for MA: largest % of micropolitan decedents died from MA poisoning (6.8% versus 4.0% in metro SAs, 5.9% in non-SAs; p=0.02)

Source: MMWR,54; 9/9/05

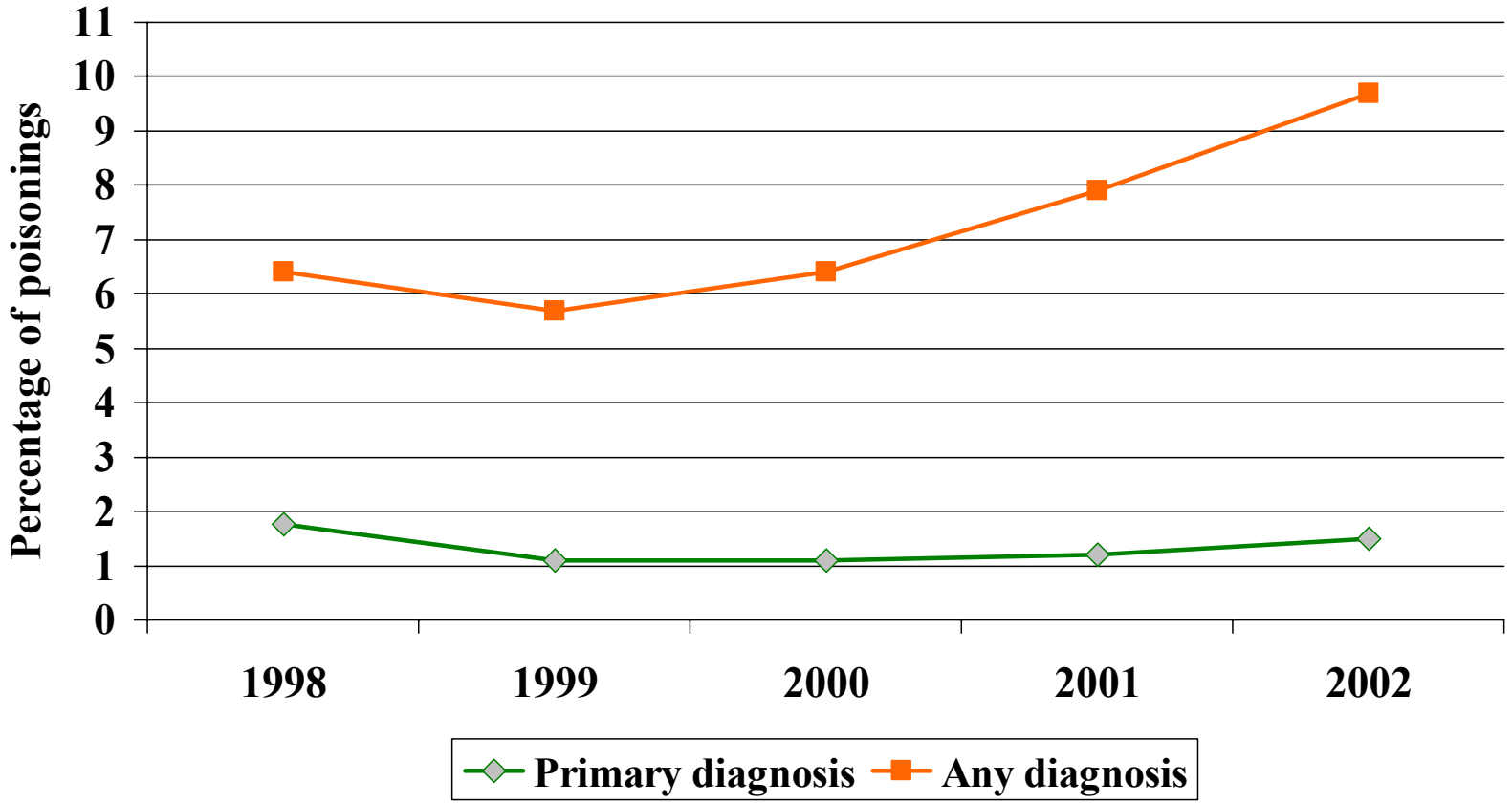
Hospitalization Inpatient Discharge Data

Number of Methamphetamine Hospitalizations in New Mexico, 1998-2002



Methamphetamine ICD9: 304.4, 305.7, 969.7
Hospital Inpatient Discharge Data (1998-2002) provided by NM Health Policy Commission

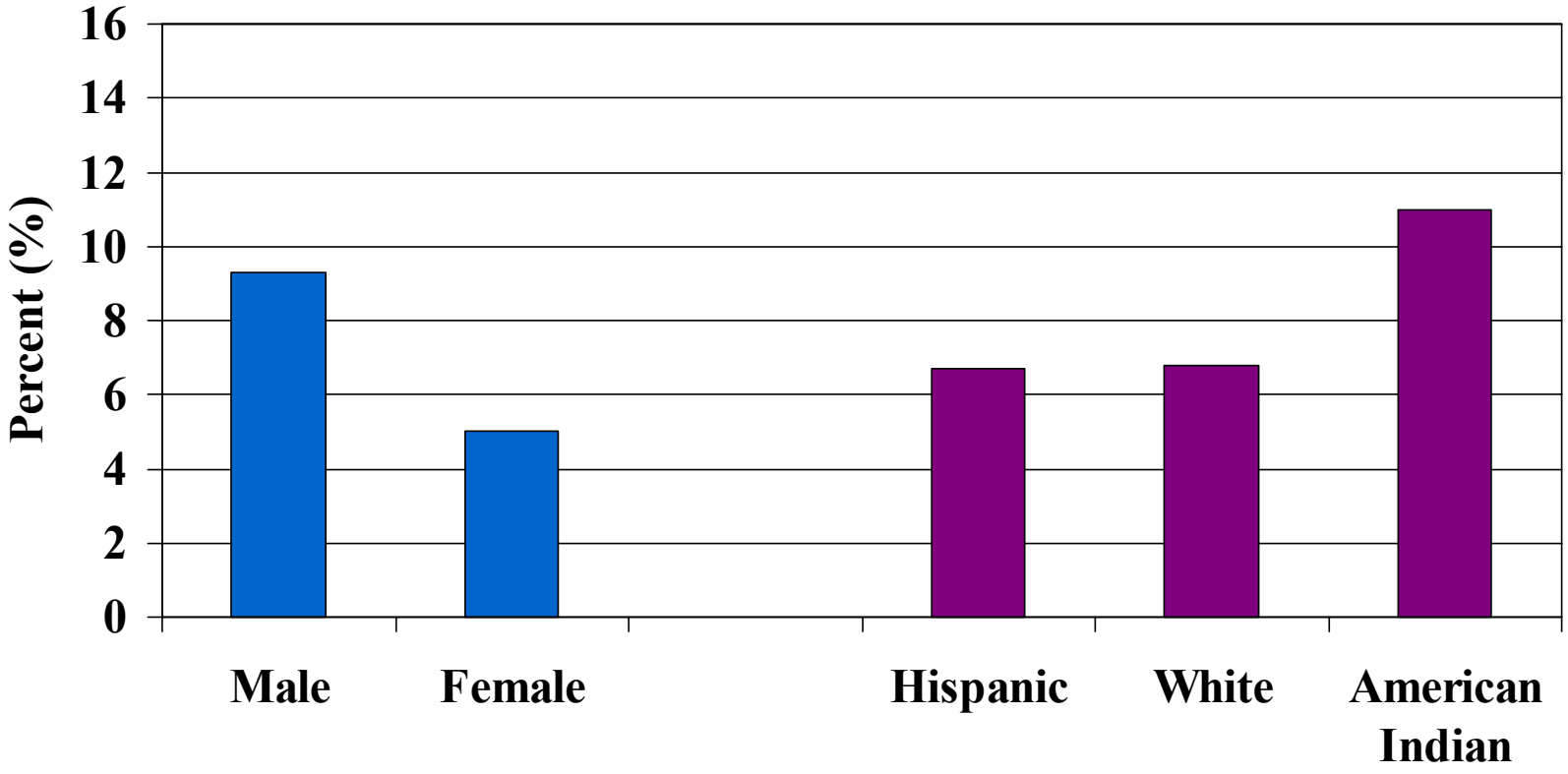
Methamphetamine Hospitalizations Among Poisoning Hospitalizations in New Mexico, 1998-2002



Poisoning ICD9: 304, 305.2-305.9, 960-979 ; Methamphetamine ICD9: 304.4, 305.7, 969.7
Hospital Inpatient Discharge Data (1998-2002) provided by NM Health Policy Commission

Youth Risk and Resiliency Survey

Prevalence of Past 12 Month Methamphetamine Use by Sex and Race/Ethnicity, Grades 9-12, 2003 YRRS



Past 12m use among males was significantly higher than females, and use among American Indians was significantly higher than Whites and Hispanics.

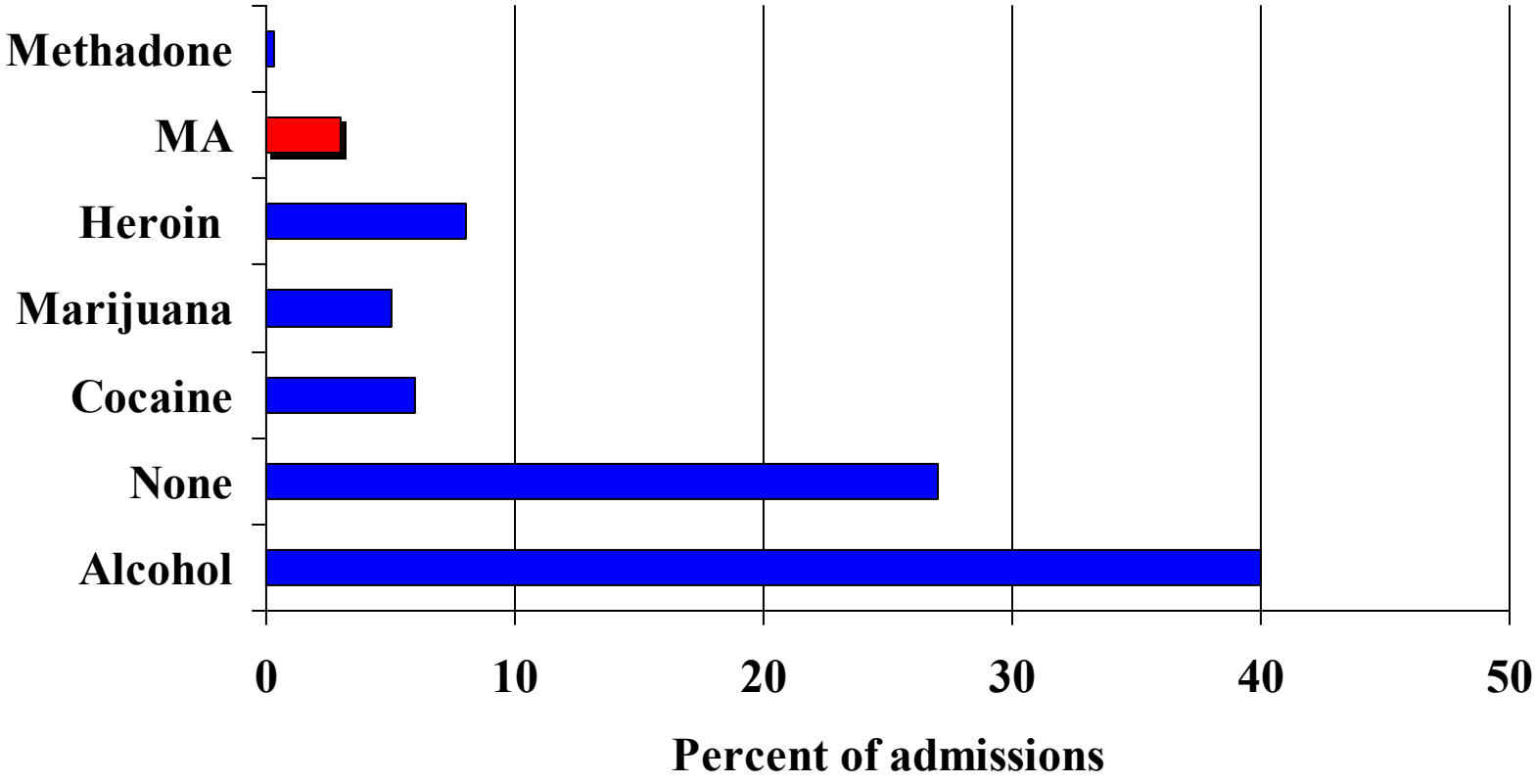
Prevalence of Past 12 Month Methamphetamine Use by Region and Urbanization, Grades 9-12, 2003 YRRS

	2001 (%)	2003 (%)	% change
Statewide	5.3	8.2	55
Planning Region			
Region 1: NW	6.6	11.2	70
Region 2: NE	2.9	8.2	**183**
Region 3: Bernalillo county	6.0	5.1	-15
Region 4: SE	3.8	10.0	**163**
Region 5: SW	5.1	8.2	61
Urbanization Level (Statistical Areas)			
Metropolitan (large, highly urban)	5.8	6.8	17
Micropolitan (small urban)	4.4	11.2	**155**
Neither (rural/frontier)	3.9	10.5	**169**

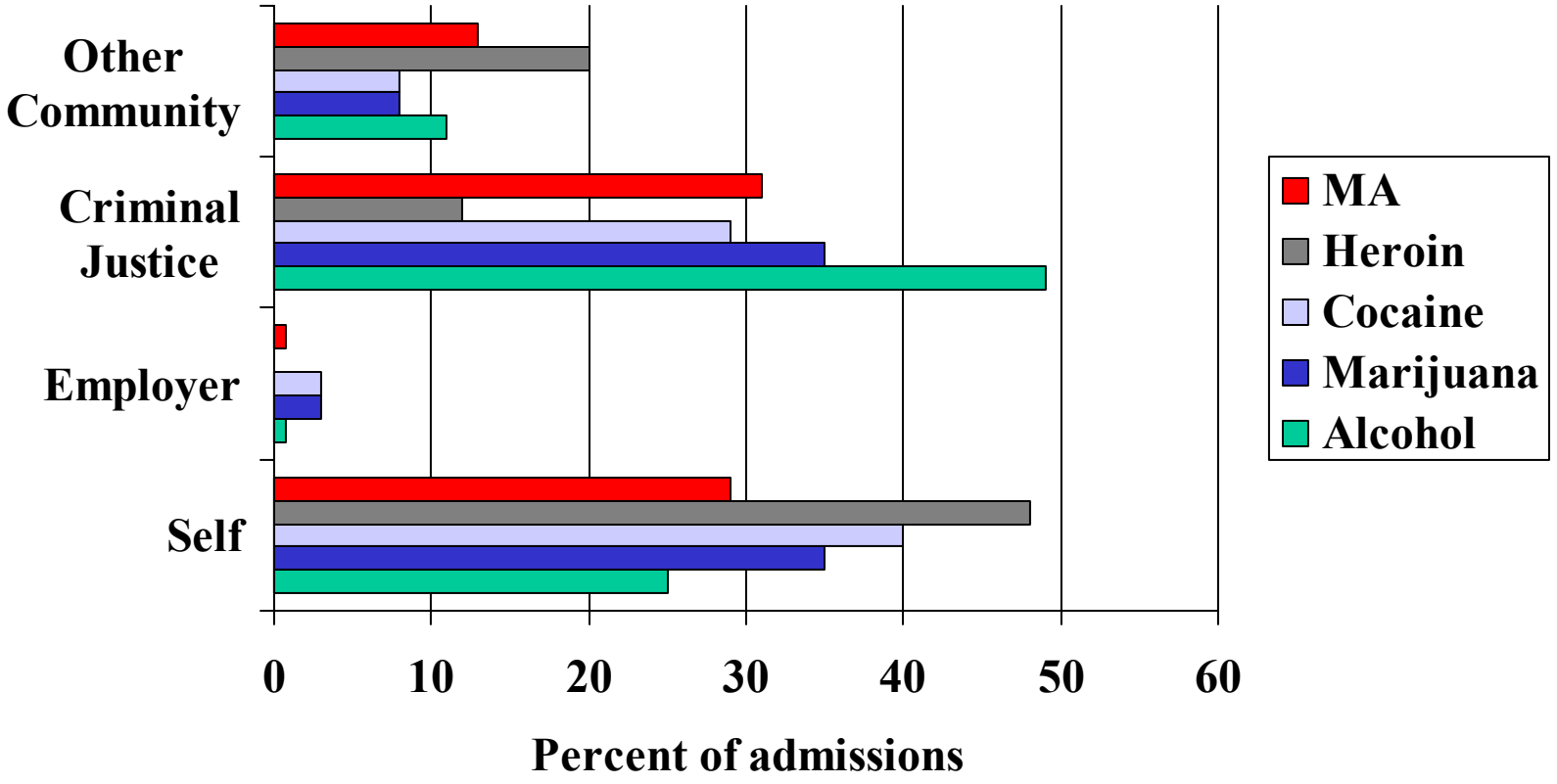
* National ***lifetime*** prevalence: 7.6%

Treatment Episodes Data Set

Adult Admissions to Treatment by Primary Substance of Abuse, TEDS, New Mexico, 2001-2003



Adult Admissions: Source of Referral by Primary Substance of Abuse, TEDS, New Mexico, 2001-2003



Methamphetamine Admissions and Route of Administration, TEDS, New Mexico, 2001-2003

Route	2001	2002	2003	Total
Oral	44%	28%	28%	61 (11%)
Smoking	16%	33%	51%	203 (36%)
Inhalation	38%	29%	33%	94 (17%)
Injection	40%	28%	32%	157 (28%)
Unknown/other	44%	28%	28%	40 (7%)
Missing data				7 (1%)
Total MA admissions (primary substance)				562

Methamphetamine Admissions by Region, TEDS, New Mexico, 2001-2003

Route	**2001**	**2002**	**2003**	**Total**
Planning Region				
Region 1: NW	30%	36%	34%	149 (27%)
Region 2: NE	33%	20%	47%	30 (5%)
Region 3: Bernalillo county	31%	34%	34%	175 (31%)
Region 4: SE	45%	14%	41%	66 (12%)
Region 5: SW	34%	21%	45%	80 (14%)
Unknown/other	15%	32%	53%	62 (11%)
Total MA admissions (primary substance)				562

Percentages of Adult Male Arrestees Testing Positive for Methamphetamine, Selected ADAM Sites, 2003

Selected ADAM Sites	% MA-positive
Albuquerque	**10.1**
Atlanta	2.0
Dallas	5.8
Honolulu	40.3
Los Angeles	28.7
Minneapolis	3.3
Phoenix	38.3
Rio Arriba county	**2.8**
San Antonio	3.5
San Diego	36.2
Seattle	12.1
Tucson	16.0
US median (all sites)	4.7

Weighted estimates are for various quarters in 2003

Source: ADAM, NIJ; http://www.ojp.usdoj.gov/nij/adam/welcome.html

Summary

- Statewide, the death rate from MA nearly doubled from 0.7 per 100,000 in 2002 to 1.3 in 2003 (12→23 deaths), and remained stable in 2004 (1.2 per 100,000; 21 deaths)
  - Decedents were primarily male and White
  - Half of overdose deaths caused by MA were caused by MA alone; 32% caused by MA in combination with heroin and/or cocaine

- MA death rates increased statewide from 2001-2002 to 2003-2004, with the largest % increases in the SW, NE and SE regions

Summary

- The highest MA death rates were found in the SE (2.1 per 100,000) and NW (1.7) regions of New Mexico in 2003-2004
  - These regions had low overdose death rates due to other illicit drugs
  - Interestingly, Albuquerque and NE region, with the most severe burden from illicit drug use, had low rates of MA overdose death
- Among all drug overdose deaths, the largest % of MA overdose deaths were among residents of small urban areas, followed by rural areas

Summary

- From 1998-2002, hospitalizations due to MA increased from 6.4% of all drug poisonings in 1998 to 9.7% in 2002
  - Primary diagnoses related to MA use have remained stable overall

- Among New Mexico students in 2003, 8.2% reported past year MA use
  - more males reported past year use of MA compared to females, as did American Indians compared to other race/ethnicities
  - From 2001 to 2003, the greatest increases in MA use was reported in the NE and SE regions, and among small urban and rural areas

Summary

- For publicly-funded drug treatment, a small % of admissions report MA as the primary substance (3%) from 2000-2003
  - Source of referral for MA admissions are largely criminal justice (31%) and self (29%)
  - There is an increasing trend for smoking among MA admissions
- Compared to to other ADAM sites in 2003, a low % of male arrestees tested MA-positive in New Mexico (10.1% in Albuquerque, 2.8% in Rio Arriba), especially compared to western cities