

Statewide Trends in Drug Overdose: Final 2021 Data Update

Note: This report updates a previous preliminary report with final 2021 death certificate and hospital discharge data.

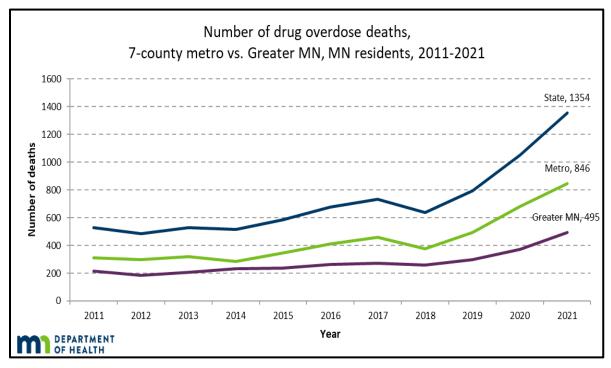
Summary

Drug overdoses continue to affect the lives of many Minnesotans. In 2021, an average of nearly four Minnesotans died each day from a drug overdose, with the total annual number of drug overdose deaths increasing 29% from 2020. The continued increase was driven by synthetic opioids (e.g., fentanyl), psychostimulants (e.g., methamphetamine), and cocaine. Moreover, for every one drug overdose death, there were 13 nonfatal hospital-treated drug overdoses.

Statewide drug overdose deaths

Statewide data show that drug overdose deaths increased 29% from 2020 to 2021 (1,050 to 1,354 deaths) (Figure 1). Increases in drug overdose deaths were seen in both the Seven-county Metro (the Metro) and Greater Minnesota. Although the number of deaths in the Metro remains higher, for the first time since 2014, a larger percent increase occurred in Greater Minnesota: in the Metro, drug overdose deaths increased 24% from 2020 to 2021 (680 to 846 deaths); in Greater Minnesota, drug overdose deaths increased 34% from 2020 to 2021 (370 to 495 deaths) (Figure 1).

Figure 1: The number of drug overdose deaths in 2021 was the highest annual number ever recorded in Minnesota.



SOURCE: Minnesota death certificates, Injury and Violence Prevention Section, Minnesota Department of Health, 2011-2021

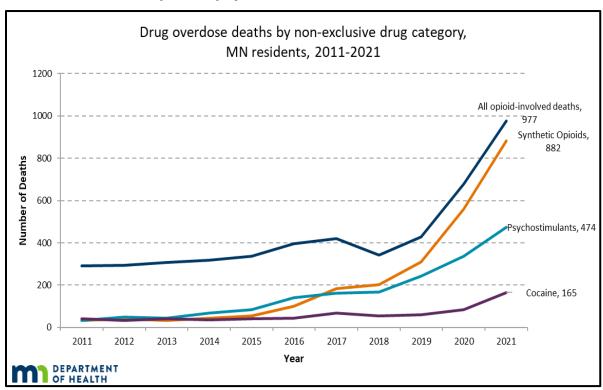
Opioid-involved overdose deaths

Statewide 2021 data show a 43% increase from 2020 for all opioid-involved deaths (685 to 977 deaths). Deaths involving synthetic opioids, including fentanyl and fentanyl analogues, increased 57% (560 to 882 deaths), and were involved in 90% of all opioid-involved deaths (Figure 2). Deaths involving commonly prescribed opioids (i.e., other opioids and methadone) decreased 6% (221 to 207 deaths); deaths involving heroin also decreased 16% (122 to 103 deaths) (data not shown).

Non-opioid overdose deaths

Statewide 2021 data show large increases from 2020 for deaths that involved stimulants. Cocaine-involved deaths increased 94% (85 to 165 deaths), and psychostimulant-involved deaths, which includes methamphetamine, increased 40% (338 to 474 deaths) during this period (Figure 2). Deaths involving benzodiazepines decreased 17% (144 to 119 deaths) (data not shown).

Figure 2: There was a large increase in overdose deaths, driven by synthetic opioids, psychostimulants, and cocaine.



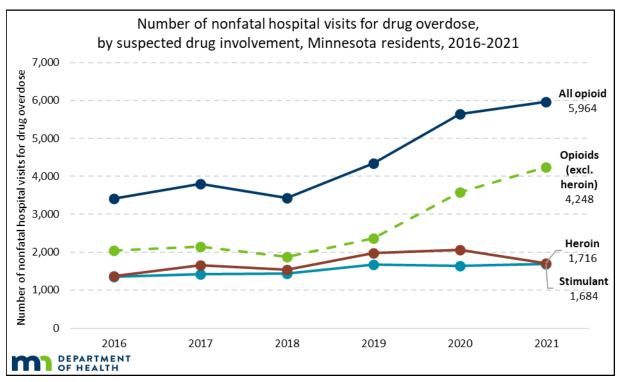
SOURCE: Minnesota death certificates, Injury and Violence Prevention Section, Minnesota Department of Health, 2011-2021. NOTE: Drug categories are non-exclusive.

Nonfatal drug overdose

In 2021, for every one drug overdose death, there were 13 nonfatal hospital-treated overdoses. Most nonfatal overdoses were treated in the emergency department (67%) and were of unintentional (i.e., accidental) or undetermined intent (65%). The number of hospital-treated nonfatal overdoses slightly increased from 2020 to 2021 (6% increase; 16,783 to 17,781 overdoses). Nonfatal overdoses increased 5% in the Metro (10,226 to 10,719 overdoses), a smaller increase than Greater Minnesota, which saw an 8% increase (6,556 to 7,058 overdoses).

Nonfatal overdoses involving at least one opioid increased 6% (5,644 to 5,964 overdoses). Despite this relatively small increase in nonfatal overdoses involving at least one opioid, there was a substantial increase in the number of nonfatal overdoses involving an opioid other than heroin (e.g., synthetic opioids, commonly prescribed opioids) (18% increase; 3,589 to 4,248 overdoses). Nonfatal overdoses involving heroin decreased 16% (2,055 to 1,716 overdoses). Nonfatal overdoses involving at least one stimulant, including psychostimulants and cocaine, remained relatively stable (1,638 to 1,684 overdoses).

Figure 3. The number of nonfatal hospital visits for drug overdoses that involved an opioid other than heroin substantially increased.



SOURCE: Minnesota hospital discharge data, Injury and Violence Prevention Section, Minnesota Department of Health, 2016-2021.

NOTES: The above data includes nonfatal drug overdoses of all intents (i.e., unintentional, intentional, undetermined).

Drugs suspected to be involved in hospital visits are often self-reported by the patient or determined by presenting symptoms at the hospital. Toxicology testing is not usually performed to determine the specific substances involved. Drug category-specific findings should be interpreted with caution.

Suggested citation

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