

FAQS

DRUG-INVOLVED AND OVERDOSE DEATH DATA

UNIVERSITY OF MISSOURI, ST. LOUIS- MISSOURI INSTITUTE OF MENTAL HEALTH

Drug-Involved Death Data

Q: Where does this data come from?

- A. The UMSL-MIMH Addiction Science team receives County-level data quarterly throughout the year from Medical Examiners' Offices across the state. As of March 2024, these include Cass, Clay, Franklin, Jackson, Jefferson, Platte, St. Charles, and St. Louis City and County.
- **To note: Medical Examiner Offices across the state provide this drug-involved death data to many groups and organizations. It is important to keep in mind that other organizations receiving this data may filter, process, and present the death figures differently than our UMSL-MIMH team. This may lead to different organizations showing slightly different counts or types of drug-involved deaths for the same time frame.**

Q. Are 'drug-involved deaths' the same thing as 'overdose deaths'?

- A. No. These two categories are slightly different. Drug-involved deaths include but are not limited to overdose deaths. For a death to be "drug-involved," drugs were present at a high enough level within a body to have contributed to the death (as determined by the medical examiner or coroner). **The data we receive from medical examiners across the state is reflective of drug-involved deaths.**
- Example: an individual would be included in the drug-involved death data if they drowned and had a high enough level of drugs in their system at the time of death for the substance(s) to have reasonably contributed to their death. It may not be clear if the drowning occurred *because* the individual had used substance(s) in such quantities, or if the person would have drowned regardless of the substances ingested.

Q: Does a medical examiner/coroner examine every individual who dies within these counties?

- A: No. A medical examiner or coroner does not see individuals who die by natural causes. They only examine those who died due to "unusual or suspicious circumstances."
- **To note: The data that we report on is based on the location/county where the initial incident or injury occurred, and not based on where they lived (their residence).**

Q: Does every individual examined by the medical examiner receive a toxicology screen?

- A: Yes. Medical examiners perform a toxicology screen on every individual they examine to check for the presence of substances (legal or illegal).

Q: How does the medical examiner determine if someone died of a drug-involved death?

- A: Many steps go into a medical examiner determining a drug-involved death. These deaths account for overdoses/acute drug toxicities, chronic drug use over time that contributed to the death, or drugs being present within a body at significant levels.
- Medical Examiners perform a toxicology screen on every individual they examine to check for the presence of substances (legal or illegal).
 - Based on the individual circumstances, medical examiners perform external exams or full autopsies as needed. Autopsies involve complete medical examinations of the body and brain to help determine the cause and manner of death.
 - The medical team completes an investigation into the individual's death by collecting and analyzing all relevant records related to the deceased. Records may include EMS reports, hospital records, medical records, nursing home records, police reports, and more.

- Based on toxicology results and other gathered information, the medical team will determine the **manner of death** (i.e., accident, suicide, homicide, natural causes, or undetermined) as well as the **cause of death**.

Q: What causes of death are included in the drug-involved death data?

A: The cause of death explains the injury or disease that led to the individual's death. This may include a multitude of causes where substances were noted at high levels within a body. Causes may include "fentanyl toxicity" or "cocaine intoxication", or a health-related condition (e.g., "myocardial infarction"), or a specific traumatic event (e.g., "motor vehicle accident").

Q. How long does it take the medical examiner to examine an individual and complete their records?

A: The typical timeframe is 8-12 weeks, but at times, this process can take many months. The lag time between an individual's death and the completion of a medical examiner record is due to multiple factors, including the manner and cause of death investigation; contacting next of kin; lab processing delays; and more.

Q. How does UMSL-MIMH filter/process the medical examiner data?

- A: We use a computer program to search for key terms in the Cause of Death field which then creates the different Drug Categories that we include in our reports (e.g.; Opioid-Involved or Stimulant-Involved).
- Example: If the Cause of Death field indicates both "Fentanyl" and "Cocaine", the record will be flagged with the following: "Fentanyl"; "Stimulant Involved"; "Opioid Involved"; "Opioid and Stimulant Involved"

Regional and Statewide Drug Overdose Death Data

Q: Where does this data come from?

- A. In addition to the Medical Examiner data described above, the UMSL-MIMH Addiction Science team receives statewide drug overdose data quarterly from the Missouri **Department of Health and Senior Services (DHSS)**. We receive these records at an aggregate level (as in, not individual record level).
- **To note, the data that we receive is based on the location where the individual lived (their residence), and not the location of the injury/event, or where they died.**

Q. How is a drug overdose death different from a drug-involved death?

A. After a medical examiner or coroner completes a death certificate, that record is then passed on to a statewide public health agency where the cause and manners of death are assessed and coded using specific identifiers. The DHSS collects data from these finalized death certificates where an overdose was the **primary cause of death**. This may include Accidental Overdoses, Suicide Overdoses, Homicide Overdoses, or Undetermined Intent Overdoses.

Q. Who determined what counties would be included in the various regions?

A. UMSL-MIMH utilizes the same regional breakdowns as Missouri state agencies. These regional breakdowns are based on the Behavioral Risk Factor Surveillance System (BRFSS) geographical groupings. The BRFSS is an ongoing telephone health survey of adults conducted in all 50 states and coordinated by the Centers for Disease Control and Prevention (CDC). [The Missouri map of regions can be found here.](#)

Visit our website to view past and current drug-involved and overdose death reports: <https://www.mimhaddisci.org/missouri-overdose-data-2>

For further information or questions regarding MIMH's drug-involved and overdose death reporting, please contact Brittany Blanchard at brittany.blanchard@mimh.edu