

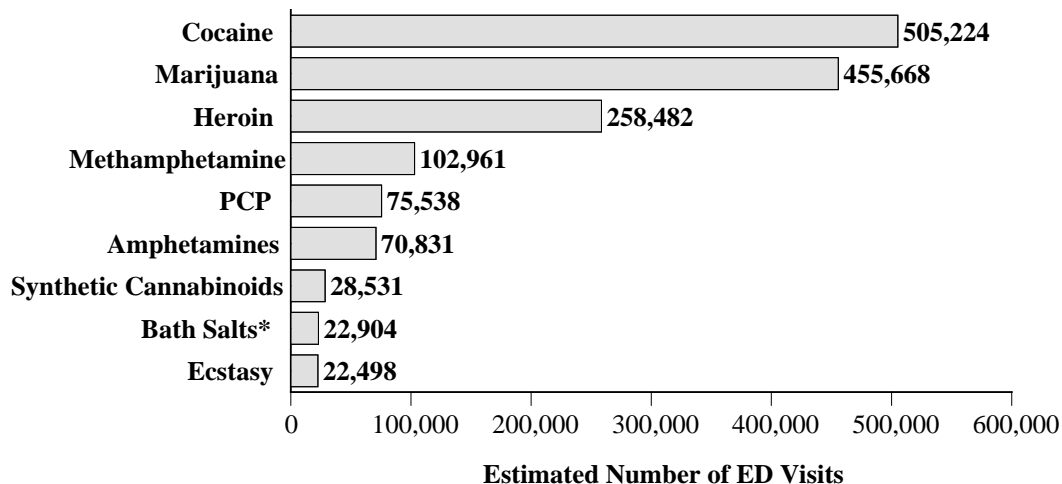
A Weekly FAX from the Center for Substance Abuse Research

University of Maryland, College Park

Cocaine, Marijuana, and Heroin Have Highest Rates of U.S. Emergency Department Illicit Drug-Related Visits

Of the estimated 2.5 million emergency department (ED) visits for drug misuse or abuse, one-half—nearly 1.3 million—involved illicit drugs, according to the most recent data from the national Drug Abuse Warning Network (DAWN). The majority of these visits involved cocaine (505,224) and marijuana (455,668), followed by heroin (258,482). The estimated number of visits related to methamphetamine, PCP, and amphetamine use ranged from approximately 71,000 to 103,000, while those related to the use of synthetic cannabinoids, bath salts, and ecstasy ranged from around 22,500 to 28,500 (see figure below). All other illicit drugs had less than 11,000 visits per year.

Estimated Rate (per 100,000 population) of U.S. Emergency Department (ED) Visits Involving Illicit Drugs, 2011



*The category Amphetamines also includes Bath Salts.

NOTES: Estimates of ED visits are based on a “nationally representative sample of general, non-Federal hospitals operating 24-hour EDs, with oversampling of hospitals in selected metropolitan areas” (p. 7). “Drugs that DAWN considers to be illicit yet have legitimate medicinal uses include amphetamines; ketamine; and anesthetic gases, such as nitrous oxide (‘laughing gas’). DAWN Field Reporters are careful to distinguish abuse from adverse reactions when classifying visits involving these drugs” (p. 25). Bath salts include substances that were specifically documented as ‘bath salts’ in the ED records. “Heroin-related ED visits may be slightly underestimated. When drugs related to an ED visit are determined through toxicology tests, heroin metabolites are indistinguishable from other opiates unless a test specifically for the heroin metabolite is conducted. In the absence of this test, or if there is no evidence in the written record that heroin, specifically, was involved, the visit will be grouped with pharmaceuticals labeled “unspecified opiates” and not classified as heroin, an illicit drug” (p. 25).

Editor’s Note: Synthetic cannabinoid-related ED visits may also be underestimated for the same reason as heroin. As noted in a 2012 DAWN Report, “Because of limited availability of tests for synthetic cannabinoids, data collection efforts in the ED may have missed visits in which they were involved.” (p. 4).

SOURCE: Adapted by CESAR from Substance Abuse and Mental Health Services Administration (SAMHSA), *Drug Abuse Warning Network, 2011: National Estimates of Drug-Related Emergency Department Visits*, 2013. Available online at <http://www.samhsa.gov/data/DAWN.aspx>.