Health Dept. reports illicit drug overdose deaths doubles in 4 years

About four overdose deaths per week investigated by the medical examiners

PROVIDENCE – The Office of the State Medical Examiners has preliminary data that show accidental deaths caused by illicit drug overdoses nearly doubled in Rhode Islanders between 2009 and 2012. Illicit drug overdose deaths involving street drugs like heroin and cocaine increased from 53 in 2009 to 97 in 2012, according to preliminary data from the State Medical Examiners’ Office.

All overdose deaths, whether caused by illicit or prescription drugs, remain a leading cause of accidental death in Rhode Island, with about four overdose deaths per week investigated by the medical examiners.

Data collected in 2013 show a reduction of accidental deaths involving prescription medications, such as Vicodin and Oxycodone. Also, alcohol was found to be a common contributing factor when combined with either illicit drugs or prescription medication. Complete data is available to view at health.ri.gov/data/death/drugoverdoses.

“These data give us a better understanding of how this epidemic is affecting Rhode Islanders and who is most at risk,” said Michael Fine, MD, director of the Department of Health (HEALTH). “The upward trend in illicit drug overdose deaths is especially of concern because we know that IV drugs pose other health risks, such as HIV and Hepatitis C. Thankfully, through key partnerships and effective strategies, we are making some progress in preventing prescription overdose deaths. However we still have a big drug problem in Rhode Island.”

On Oct. 9, HEALTH and the Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH) held a press conference to announce the findings and to raise public awareness about prevention and treatment strategies in place. They were joined by the Rhode Island State Police and other addiction recovery advocates.

The State Medical Examiners’ data show that contrary to common assumptions, Rhode Island’s drug overdose epidemic is not limited to younger adult males. While men accounted for twice as many accidental drug overdose deaths from 2009-2012, people ages 40 through 60 accounted for most of the drug overdose deaths overall.

“These data are of great concern to our department,” said Craig Stenning, Director of BHDDH. “We are committed to continuing to develop effective prevention strategies and increasing access to treatment and recovery support services in an effort to help improve these statistics.”

In Rhode Island, three key intervention strategies have been implemented over the last year in a concerted effort to address medication addiction, illicit prescription diversion, and accidental drug overdose deaths:

- Naloxone, a medication that reverses an overdose from opioids [e.g. heroin, morphine, oxycodone] is now available without a prescription so that a layperson can help reverse a drug overdose of a friend or loved one. Emergency medical professionals have used this safe and effective antidote for decades. In 2013, Walgreens became the first and only pharmacy chain to make Naloxone available without a prescription.
- Rhode Island expanded its Good Samaritan Law. Callers to 911 now have immunity from prosecution if illicit drugs are involved in the emergency.
- HEALTH launched its Prescription Monitoring Program (PMP) in September of 2012. The PMP enables doctors, other prescribers, and pharmacists to monitor and protect patients from dangerous drug combinations and quantities, and helps reduce the amount of prescription drugs that can get into the hands of people without a prescription.

More information for prescribers: Safe Opioid Prescribing health.ri.gov/saferx

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Miriam surgeon performs state’s first robotic thoracic surgical procedure

PROVIDENCE – IKENNA OKEREKE, MD, chief of thoracic surgery at Rhode Island Hospital and The Miriam Hospital, has become the first surgeon in Rhode Island to perform a thoracic (chest) surgical procedure using minimally invasive robotic technology.

The technology allowed Dr. Okereke to remove and biopsy what turned out to be a benign tumor in the patient’s mediastinum.

“The surgical robot gives us access inside the chest cavity and mediastinal tissues through tiny incisions, providing better, three-dimensional visualization and improved dexterity and manipulation,” he said, adding that the procedure has been shown to result in significantly less post-operative pain, less blood loss, less scarring and shorter recovery times than traditional open mediastinal surgery.

The use of robotic thoracic surgery, currently offered by Dr. Okereke and fellow thoracic surgeon Thomas Ng, MD, is evaluated on a case-by-case basis. Both are members of University Surgical Associates.