



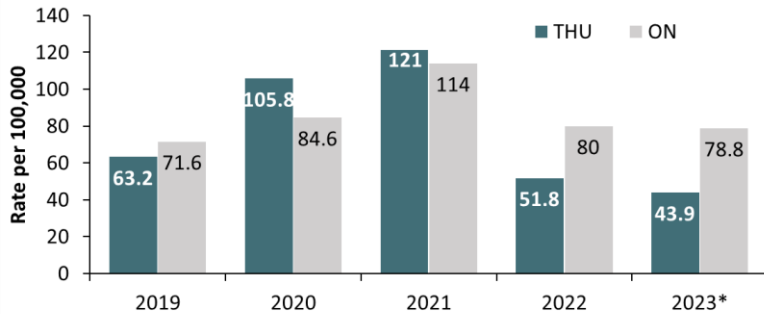
The report includes data from the Timiskaming Health Unit (THU) catchment area, which includes the Timiskaming District and Temagami.

Rates for 2023 are annualized (what you would expect to see if rates continued for the whole year), unless otherwise stated. Annualized rates make it easier to compare to previous years.

Emergency Department (ED) Visits^{1,2}

2019-2023* (Sept)

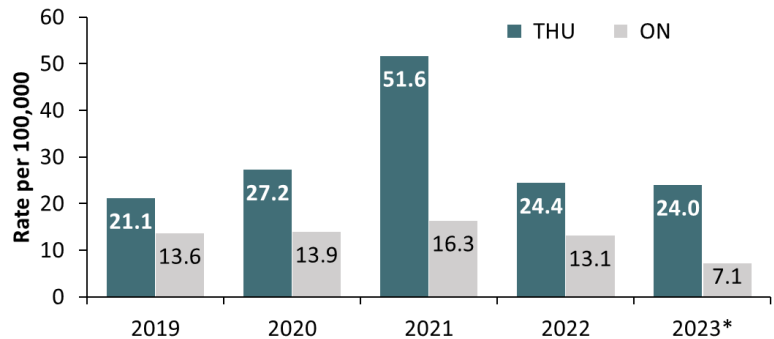
Rate of **confirmed** opioid-related ED visits, Timiskaming and Ontario



Hospitalizations^{1,3}

2019-2023* (March)

Rate of **confirmed** opioid-related hospitalizations, Timiskaming and Ontario



In Timiskaming, most ED visits in **2019-2022** were among individuals aged **25 to 44**.

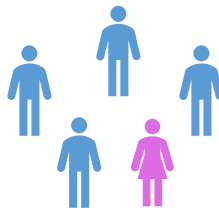


In 2022, there were **129.1 visits per 100,000**.

In Timiskaming, most hospitalizations in **2019-2022** were individuals aged **45 to 64**.



In 2022, there were **32.9 hospitalizations per 100,000**.



In Timiskaming, most ED visits, and hospitalizations in **2021-2022** occurred in **MALES¹**.

Male ED visit rate:
113.4 per 100,000.

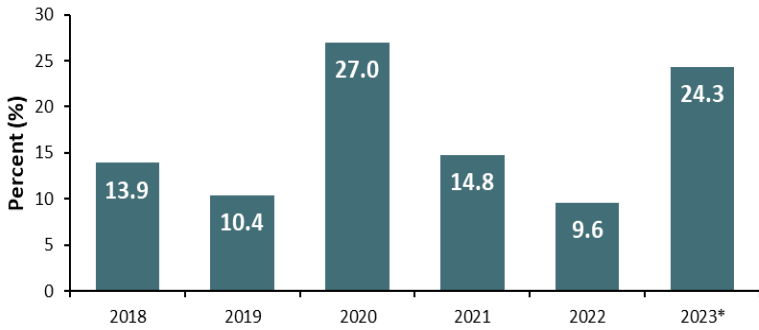
Male hospitalization rate:
46 per 100,000.

Female ED visit rate:
60.4 per 100,000.

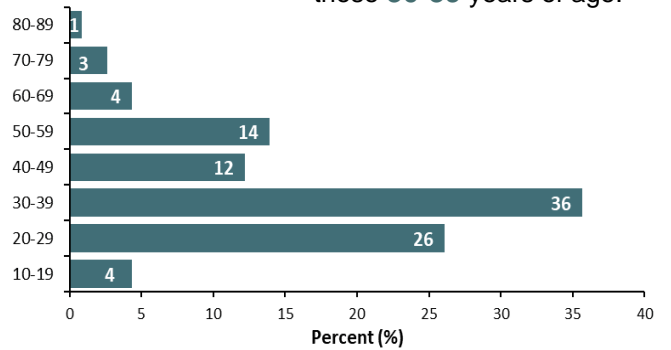
Female hospitalization rate:
30.2 per 100,000.

Emergency Services (EMS) Calls in Timiskaming⁴

Percent paramedic services calls for **suspected** opioid-related incidents, 2018-2023(Sept*)



Most EMS calls were among those **30-39** years of age.

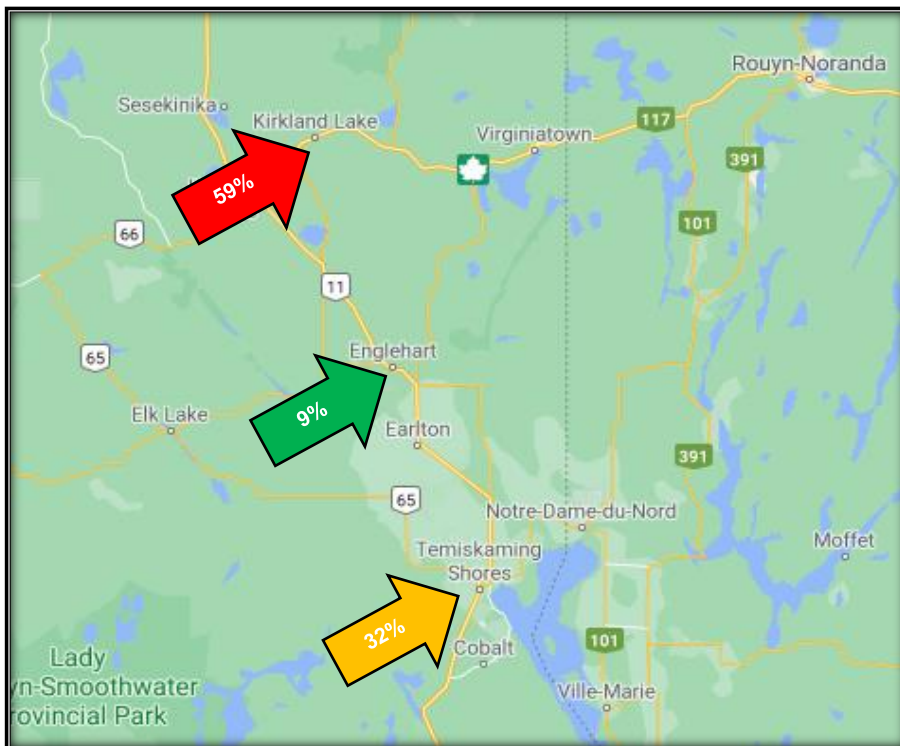


74% of EMS calls were among **males**.

26% of EMS calls were among **females**.



2018-2022: EMS calls for Suspected Opioid Incidents by Hospital Location⁴



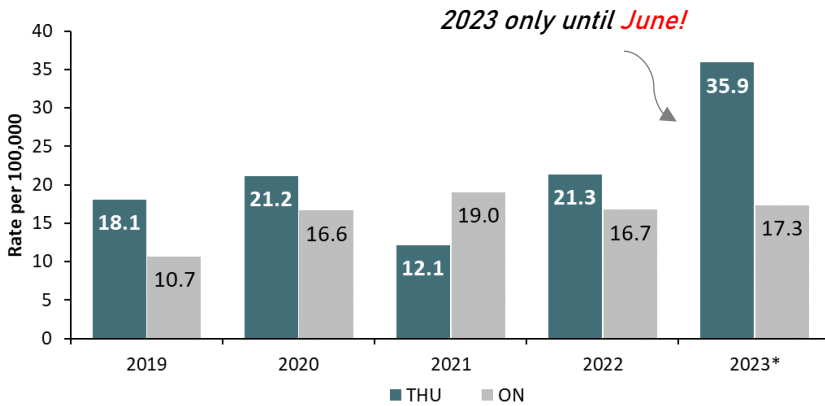
Blanche River Health – Kirkland Lake
59%

Temiskaming Hospital - 32%

Blanche River Health - Englehart 9%

Deaths^{1,5,6}

Rate of **confirmed** opioid-related deaths, Timiskaming and Ontario, 2019-2023*(June)



*2023 and 2022 deaths are confirmed & probable

In Timiskaming, **MALES** had a higher rate of opioid-related deaths compared to females from **2021- 2022**.

Male Death Rate
27.6 per 100,000

Female Death Rate
6.0 per 100,000

In **2022**, most deaths were among individuals aged **45 to 64**.



**54.9 visits
per 100,000.**

Confirmed & probable cumulative death rate ⁵ in 2023 (January to June) and absolute count:

Timiskaming*: 18.0 per 100,000 (**6** deaths)

Ontario*: 8.6 per 100,000 (**1324** deaths)

Cumulative death rate⁵ for the same period in **2022**:

Timiskaming: 15.2 per 100,000 (**5** deaths)

The most common opioid present at time of death in 2022⁶:

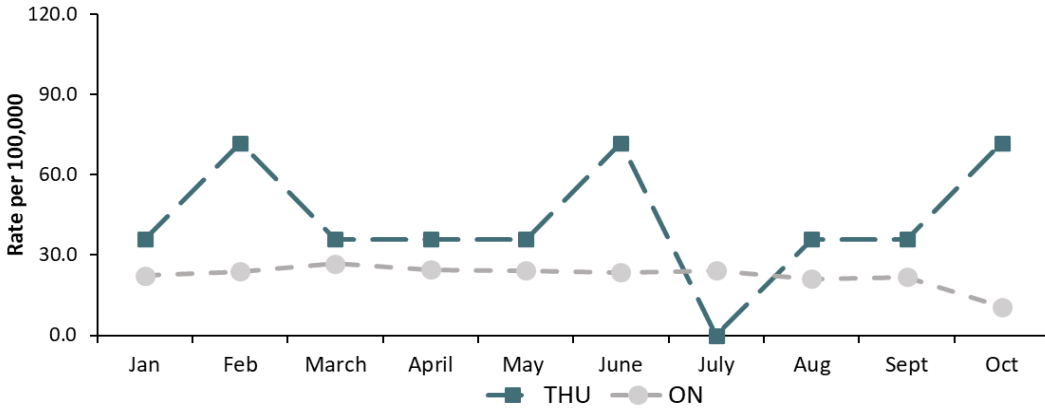
Timiskaming: FENTANYL (all types) was present in **71%** of all opioid-related deaths

Ontario: FENTANYL (all types) was present in **84%** of all opioid-related deaths.

*Rates above are **NOT** annualized for 2023

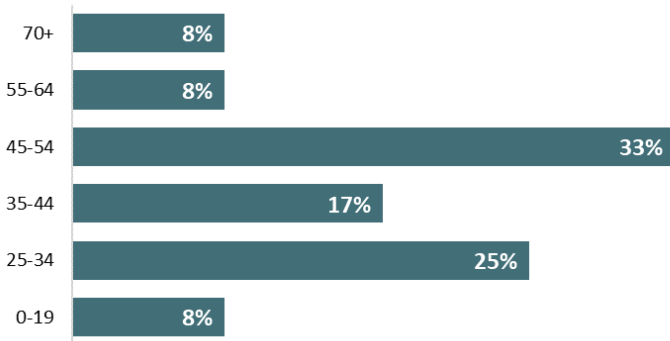
2023: Suspected Drug Related Deaths^{5,7}

Rate of suspected drug-related deaths, Timiskaming and Ontario, 2023 (Jan to Oct*)



In Timiskaming, there have been **12** suspected-drug related deaths in **2023** so far.

For the same period (Jan-Oct) in **2022**, there were **14** suspected-drug related deaths.



In 2023, most deaths have been among those aged **45-54**⁷.



Three quarters (75%) of deaths in 2023 are among males⁷.

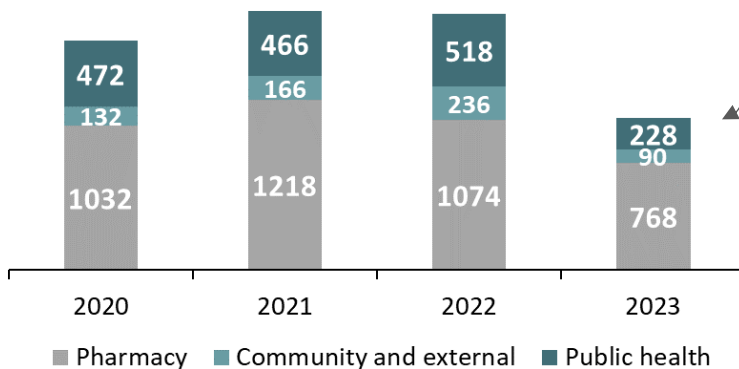
Naloxone Use in Timiskaming^{8,9}

Naloxone was administered **71** times from **2018-2023** during EMS opioid-related incidents⁴.



Naloxone **doses** distributed, by distributor, 2020-2023 (June*).⁸

2023 only until Sept



2023 only until June

Notes

- 2023 data is preliminary and therefore, is subject to change.
- Rates are calculated using the listed place of residence at the time of incident.
- Rates in regions with small populations such as Timiskaming should be interpreted with caution as they can be easily influenced by a small number of deaths.
- For more detailed provincial and local data visit [Public Health Ontario's Interactive Opioid Tool](#).

Limitations

- ED visit and hospitalization data only captures those who visit the ED/are hospitalized and may not reflect the total burden on the population.
- Ontario residents who visit an ED, are hospitalized, or die outside the province are not captured.

References

1. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Interactive Opioid Tool. Toronto, ON: Queen's Printer for Ontario; 2019. Available from: <https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool>
2. Weekly emergency department visits for opioid overdose [data file]. January 2023 – December 2023. Ottawa, ON: Ministry of health and Long-term care. National Ambulatory Care Reporting System (NACRS), Canadian Institute for Health (CIHI).
3. Discharge Abstract Database (DAD). Ottawa, ON: Canadian Institute for Health Information [producer]; Toronto, ON: Ontario. Ministry of Health and Long-Term Care, IntelliHealth Ontario [distributor]; [unpublished] [data extracted 2023 Oct].
4. Emergency Medical Services Report [data file]. DTSSAB EMS [distributor].; [unpublished] [data received 2023 Sept].
5. Ontario Opioid-Related Death Database – Monthly update. January 2018 – June 2023 [data file]. Toronto, ON: Office of the Chief Coroner for Ontario; [unpublished] [data received 2023 Sept].
6. PHU Quarterly Opioid-Related Mortality Reports. Coroner's Opioid Investigative Aid, May 2017 - March 2023, Office of the Chief Coroner for Ontario, extracted August 14, 2023 [data file]. Toronto, ON: Queen's Printer for Ontario; 2019.
7. Ontario Opioid & Suspected Drug-Related Death Database – Weekly update. January 2022 – Oct 2023 [data file]. Toronto, ON: Office of the Chief Coroner for Ontario; [unpublished] [data received 2023 Oct].
8. ONP statistics [internal data file]. 2018-2023. Timiskaming Health Unit; extracted Sept 2023.
9. ONPP Naloxone Monthly Data. 2020-2023. Health Network System. Addiction and Substances Policy and Programs Unit; Ministry of health and Long-term Care; [unpublished] [data received 2023 July].