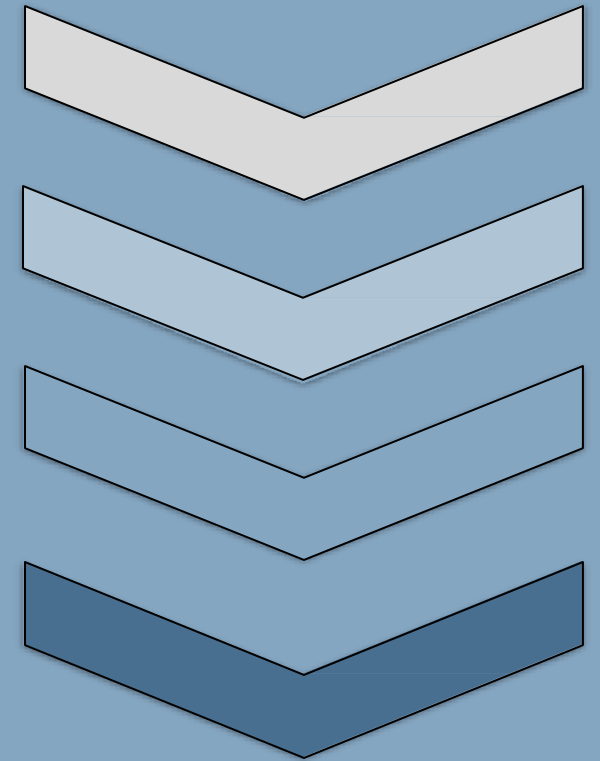


THE MISSISSIPPI OPIOID AND HEROIN DATA COLLABORATIVE



Provisional Data Report Third Quarter (July - September) 2024

**Mississippi Board of Pharmacy
Mississippi Bureau of Narcotics
Mississippi State Department of Health
Mississippi Department of Mental Health
Mississippi Public Health Institute**

02/03/2025

DATA AND REPORT OVERVIEW

- This report summarizes data on opioid prescriptions dispensed in Mississippi, fatal drug overdoses reported to the Mississippi Bureau of Narcotics, naloxone administrations by Emergency Medical Services for suspected overdoses, drug-related arrests, and treatment services for opioid-related disorders within facilities certified by the Mississippi Department of Mental Health.
- The goal of this report is to provide timely and accurate information to public and policy makers on key indicators measuring the scope and severity of the opioid epidemic in Mississippi. The findings reported here, therefore, aim to inform and support data-driven decision-making. This report is updated quarterly to foster continuous quality improvement.
- All of the statistics featured in this report are based on available data. Data availability limitations vary somewhat across reported indicators. Detailed information regarding each of the data sources used in the report is presented in the technical notes on page 2.



This project was supported by the following grants:

The State Opioid Response (SOR) Grant No. TI083319 awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA). The SOR program aims to address the opioid crisis by increasing access to medication-assisted treatment using the three FDA-approved medications for the treatment of opioid use disorder, reducing unmet treatment need, and reducing opioid overdose-related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) (including the illicit use of prescription opioids, heroin, and fentanyl and fentanyl analogs). This program also supports evidence-based prevention, treatment, and recovery support services to address stimulant misuse and use disorders, including for cocaine and methamphetamine.

Mississippi COAP (Comprehensive Opioid Abuse Program) for Grant Period 2018 – 2022, was a data quality improvement initiative funded by the Office of Justice Programs. COAP enhanced the quality of Mississippi’s data on state-level opioid overdoses and related risk factors. Such data are necessary to conduct ongoing monitoring of the impact of opioid overdoses and related challenges within the state. They also provide opportunities for data-driven opioid problem mitigation.

** The original formatting for these reports was developed by Manuela Staneva, MPH, Epidemiologist, Mississippi State Department of Health.*

TECHNICAL NOTES

Data Sources

Prescription Monitoring Program (PMP): The PMP is a statewide electronic database designed to collect information on the dispensing of controlled substances. These data are used to inform the public about current trends in prescription drug use and assist medical professionals in making informed clinical decisions while preventing the illegitimate use of controlled substances. PMP data is collected by the Mississippi Board of Pharmacy. The findings presented in this report include prescriptions for opioid analgesics and opioid-containing cough medications.

Drug-Related Mortality Data: The Mississippi Bureau of Narcotics draws data regarding overdose deaths from information as reported by coroners. In an effort to be consistent, MBN provides the number of overdose deaths that are reported for the quarter in which the death occurred, as determined by the coroner. Additionally, not all coroners report overdose deaths during the period that they occurred due to local variations in reporting capacity. Therefore, the reported data on overdose death counts may be incomplete, thereby creating a possible undercount for any given reporting period.

Mississippi Emergency Medical Services Data: The Mississippi State Department of Health collects state-level data and maintains a cutting-edge database on all episodes of emergency medical care delivered by Emergency Medical Services (EMS). The data set contains structured data elements such as incident date and county, patient demographics, main patient complaint, and medications administered. It should be noted that transitions in data reporting systems may lead to future updates of these data.

Syndromic Surveillance Emergency Department Data: Syndromic surveillance (SynS) provides public health officials with a timely system for detecting, understanding, and monitoring health events. By tracking symptoms of patients in emergency departments—before a diagnosis is confirmed—public health professionals can detect unusual levels of illness to determine whether a response is warranted. Syndromic data can serve as an early warning system for public health concerns and can allow public health officials to characterize the extent of opioid and other drug-related overdoses in communities. Note: As of June 1, 2022, there are 70 health systems submitting SynS Emergency Department data in Mississippi. This figure does not mean just 70 hospitals. For instance, Baptist Memorial is counted as one of the 70 systems; however, they have many hospitals and clinics under one health system. Similarly, the University of Mississippi Medical Center (UMMC) is also counted as one of the 70 systems; however, they have multiple emergency rooms in the Jackson hospital as well as a hospital in Grenada. Overdose data from the SynS Emergency Department indicates patient admission to an emergency department for an overdose. For drug overdose mortality data, see ‘Drug- Related Mortality Data’ reported by MBN.

Treatment Admissions for Opioid Use Disorder: Data included admissions reported by substance use disorder (SUD) treatment providers that are certified by the Mississippi Department of Mental Health (DMH). The data represent outpatient and inpatient services, including medication-assisted treatment, as reported through DMH’s data tracking tool. Treatments delivered within non-DMH certified facilities and general hospital admissions for SUDs are not featured in this report. Estimates reflect the number and types of patients commonly served by publicly funded treatment programs.

Drug-Related Crime Data: The arrest data reflects all drug-related offenses including the manufacture, sales, and possession of any controlled substance. These data may not be complete because of underreporting by local police departments. Additionally, crime statistics are influenced by the scope of law enforcement activities. Greater law enforcement capacity, for example, may lead to increased arrest rates for particular offenses.

Population Estimates for Mississippi: Rates were calculated using the 2023 Mississippi population estimates released by the U.S. Census Bureau. Accessed on 4/15/2024 at: <https://www.census.gov/quickfacts/MS>.

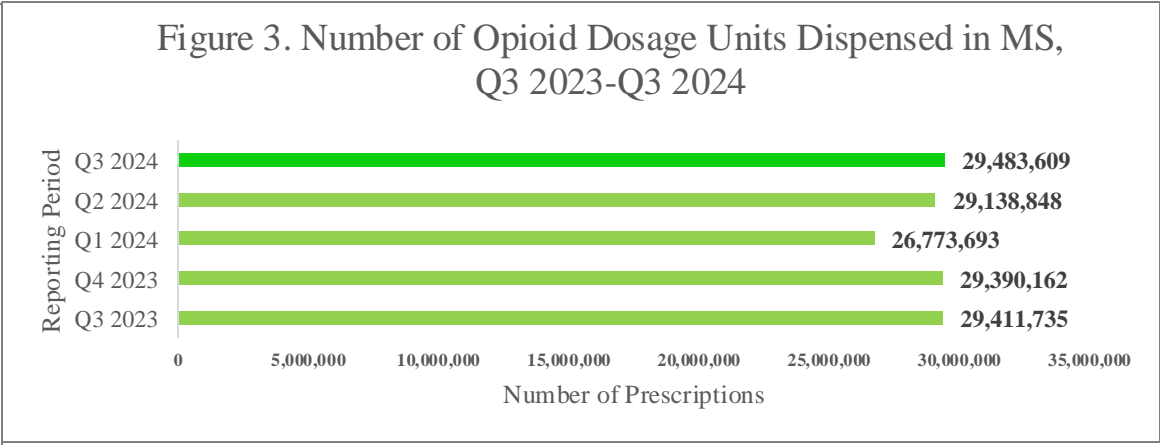
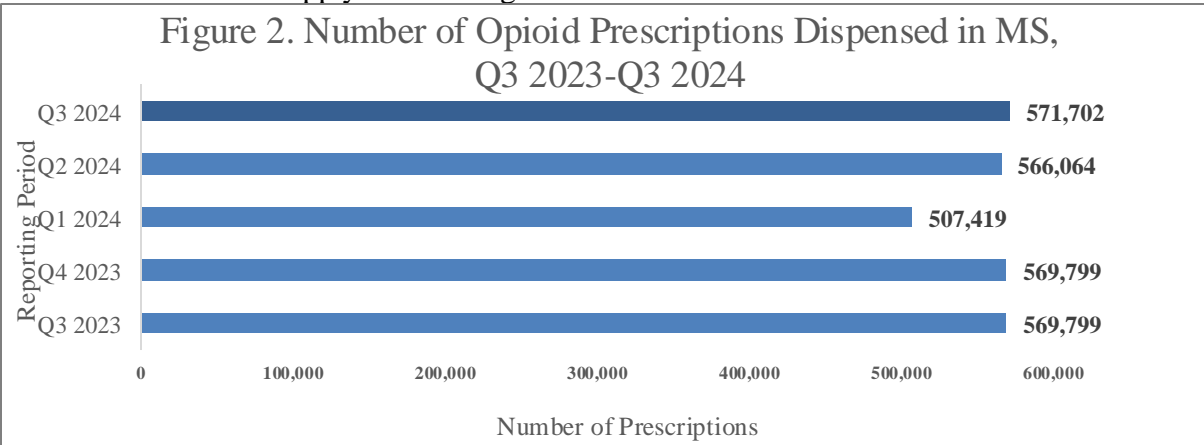
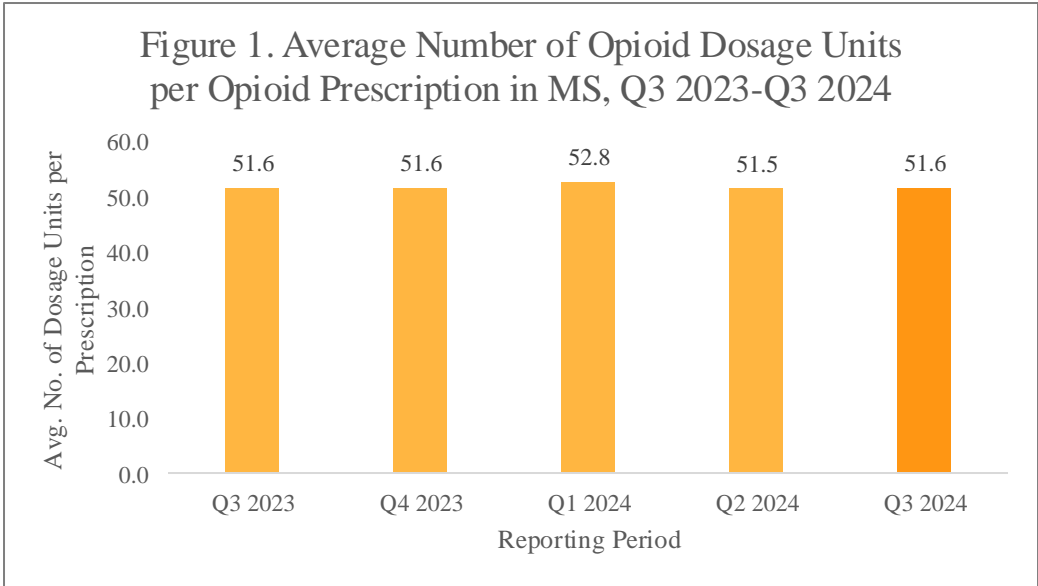
Historical Data: An appendix of previous years’ data can be found at the Mississippi State Department of Health website: https://msdh.ms.gov/msdhsite/_static/44,0,382,740.html.

References:

1. National Take Back Day Results. Drug Enforcement Administration. 2022. Accessed on 4/1/2021 at <https://takebackday.dea.gov/>
2. Public Controlled Substance Disposal Locations. Accessed on 3/25/2022 at <https://apps.dea diversion.usdoj.gov/pubdispsearch/spring/main?execution=e2s1>

OPIOID PRESCRIPTIONS AND DOSAGE UNITS DISPENSED

- **Opioid Prescriptions:** In Q3 2024, 571,702 opioid prescriptions were dispensed in Mississippi.
 - On average, 6,352 opioid prescriptions were dispensed every day during this quarter.
 - A 1.53% decrease in the number of opioid prescriptions was observed from Q3 2023 to Q3 2024.
 - In Q3 2024, there were enough opioid prescriptions dispensed for 19.38% of Mississippians to have a prescription.
- **Opioid Dosage Units:** During Q3 2024, over 29 million opioid dosage units (e.g., pills) were dispensed in Mississippi.
 - On average, approximately 327,595 dosage units were dispensed each day during Q3 2024.
 - Compared to Q3 2023, the number of dosage units dispensed decreased by 0.2% or approximately 344 thousand pills in Q3 2024.
 - In Q3 2024, there were enough opioid dosage units dispensed for each Mississippian to have a supply of 10 dosage units.



CONSIDERATIONS: This report identified a considerable decline in the number of opioid prescriptions from 2019. This downward trend could be driven by regulation revisions made between 2018 and 2019 by the MS Board of Medical Licensure, MS Board of Nursing, and the MS Board of Dental Examiners as well as educational outreach and prevention efforts.

SUSPECTED DRUG OVERDOSE DEATHS

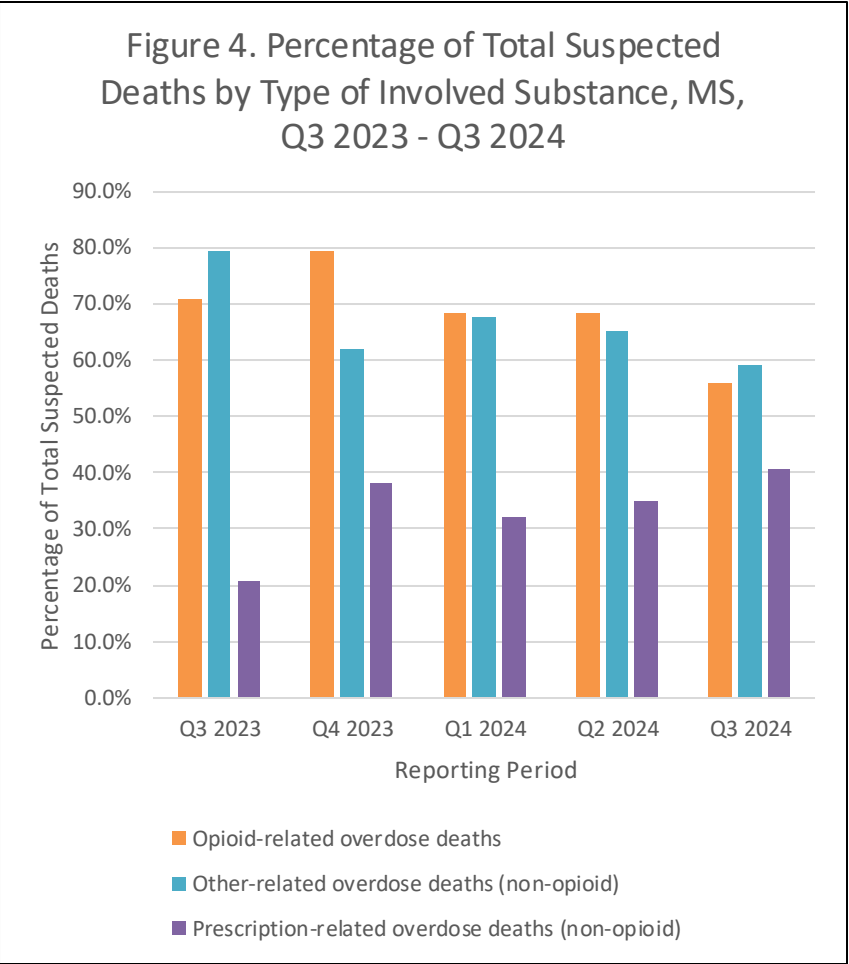
FINDINGS

- In Q3 2024, 34 (55.74%) of the 61 suspected overdose deaths reported to the Mississippi Bureau of Narcotics (MBN) were opioid-related. The number of opioid-related deaths decreased by 51% from Q3 2023 to Q3 2024, and the total number of overdose deaths decreased by 38.38%.
- The number of deaths involving heroin decreased from Q3 2023 (3 deaths) to Q3 2024 (1 death) by 66.67%.
- There were 1.14 opioid-related overdose deaths per 100,000 persons reported to the Mississippi Bureau of Narcotics (MBN) in Q3 2024.
- The number of deaths involving fentanyl decreased 46.43% from Q3 2023 (28 deaths) to Q3 2024 (15 deaths).
- 26 of the 61 overall total suspected overdose deaths involved methamphetamine, and 13 of the 34 total opioid related suspected overdose deaths involved methamphetamine.

Table 1. Number of Suspected Overdose Deaths Reported to MBN by Type of Involved Substance, MS, Q3 2023-Q3 2024

	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024
Prescription opioid related overdose	12	8	10	8	8
Fentanyl-related deaths	28	47	29	20	15
Fentanyl and prescription-related deaths	26	23	26	23	9
Heroin-related deaths	3	1	0	1	1
Heroin and prescription-related deaths	0	0	0	0	0
Heroin and Fentanyl-related deaths	1	2	2	0	1
Total opioid-related overdose deaths	70	81	67	52	34
Other-related overdose deaths	23	13	21	13	16
Prescription-related overdose deaths	6	8	10	7	11
Total non-opioid related overdose deaths	29	21	31	20	27
Overall total suspected overdose deaths	99	102	98	72	61

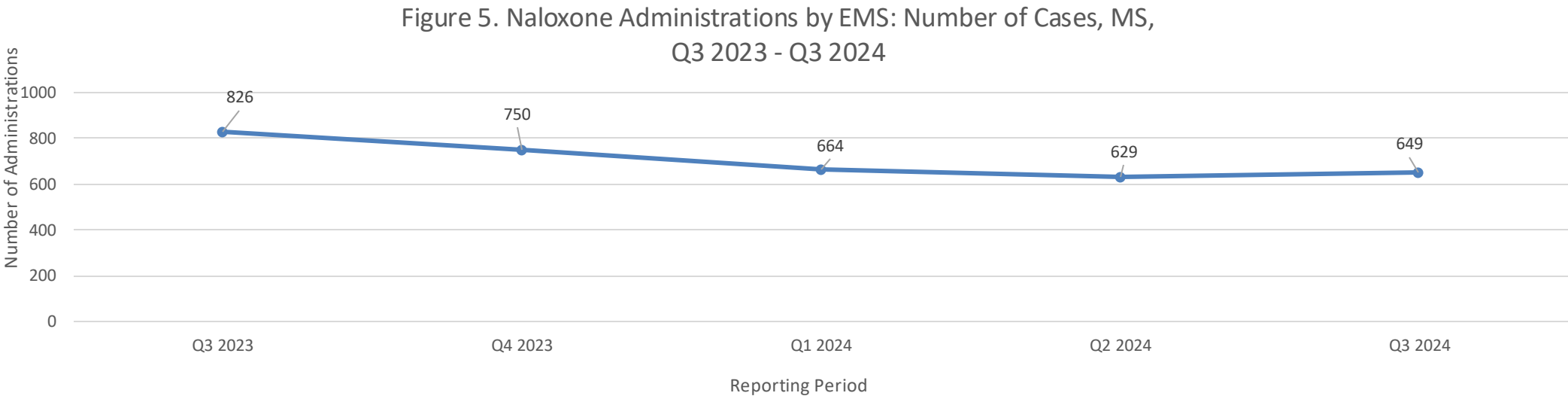
CONSIDERATIONS: The accurate assessment of drug-related fatalities depends on complete and high-quality data. The reliability of mortality data, however, is impacted by several constraints such as insufficient resources, training, or time for performing thorough death investigations. In addition, Mississippi lacks a centralized system for connecting different entities involved in the compilation and reporting of mortality data. Efficient collaboration among state agencies, educational outreach for coroners, and standardized protocols for drug overdose investigation and reporting are measures that can improve drug-related mortality surveillance. It should also be noted that the MBN does not include a death in the count until a toxicology report has been completed; therefore, currently pending cases may result in increased numbers in the future.



EMS NALOXONE ADMINISTRATIONS

FINDINGS

- Emergency Medical Services (EMS) data revealed that naloxone was administered 649 times during Q3 2024, which is a 21.4% decrease compared to Q3 2023 (826).
- On average, 216 naloxone administrations were reported in Mississippi each month during Q3 2024.



CONSIDERATIONS: The life-saving drug naloxone, an opioid antagonist, is used to reverse opioid overdose. The emergence and growing popularity of highly toxic synthetic opioid substances require the following state-level actions:

- Facilitating and expanding access to naloxone for patients with opioid use disorders.
- Providing training on naloxone administration for all first responders and all persons at risk for opioid-related overdoses as well as their families, friends, and community members.

IMPORTANT MESSAGE: Figure 5 documents only naloxone distributed through EMS. Additional distribution occurs through the State Opioid Response (SOR) grant and a standing order. In May 2018, State Health Officer of Mississippi, Dr. Mary Currier, signed a standing order that covers, without a prescription, the dispensing and administration of naloxone. The standing order was re-signed by Dr. Paul Byers, State Epidemiologist, in May of 2019 2020, 2021, 2022 and 2023.

SUSPECTED OVERDOSE DEATHS AND NALOXONE ADMINSTRATIONS BY COUNTY

FINDINGS

- **Suspected Overdose Deaths:** The top 3 counties Alcorn (18), Hinds (10), and Sharkey (8), accounted for 359.02% of all suspected overdose deaths in Q3 2024.
- **Naloxone Administration:** The top 3 counties: Harrison (87), Lauderdale (58), and Hinds (56), accounted for 31.0% of all 649 EMS naloxone administrations in Q3 2024.

Figure 6. Number of Suspected Overdose Deaths by County, MS, Q3 2024

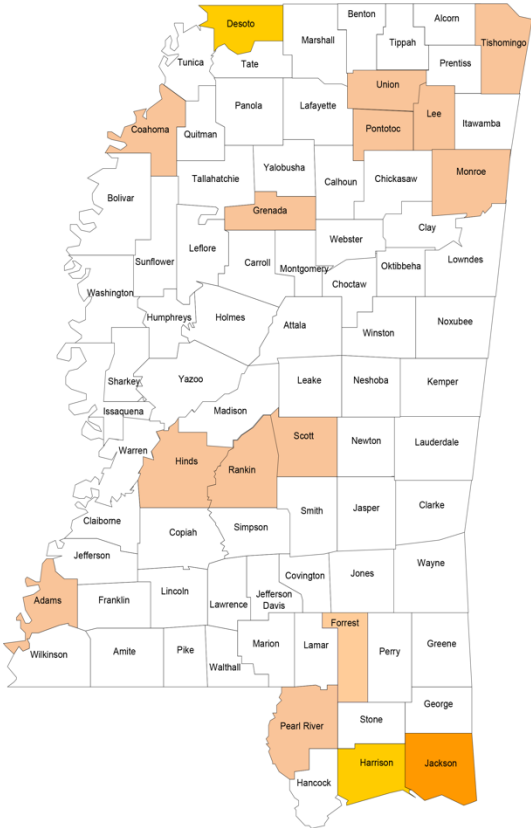
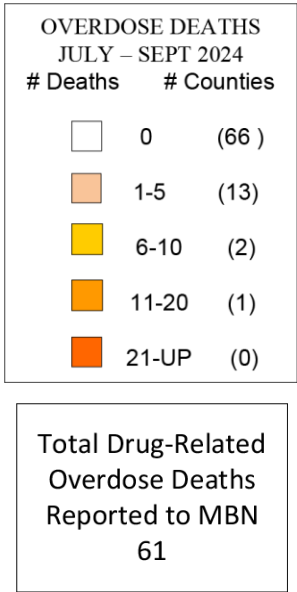
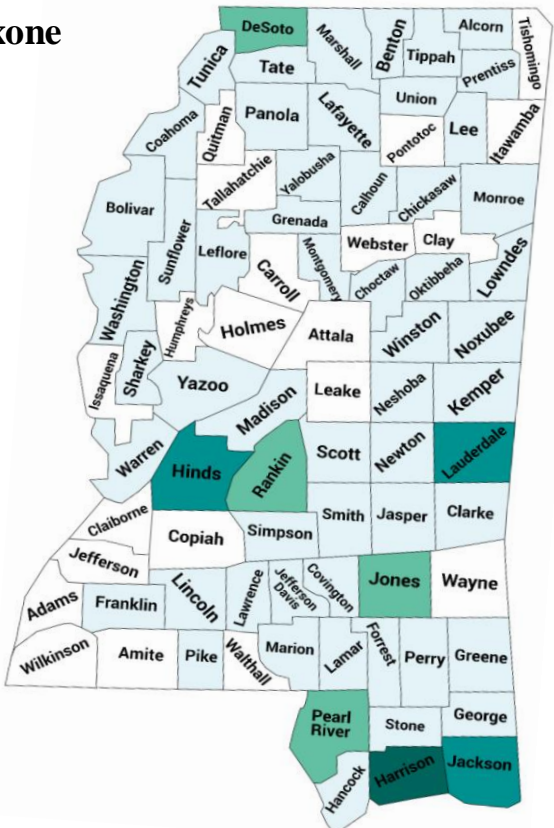
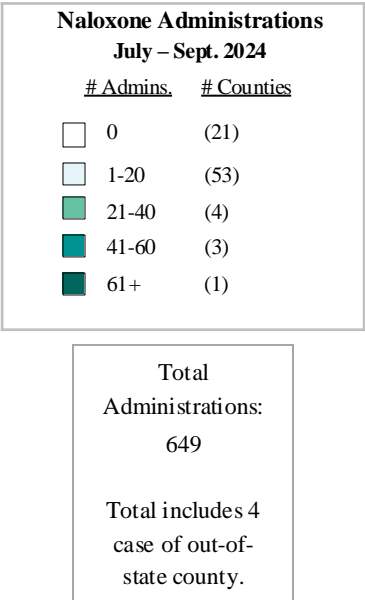


Figure 7. Number of EMS Naloxone Administrations by County, MS, Q3 2024



Data Source: Drug-Related Mortality (Mississippi Bureau of Narcotics)

Data Source: Mississippi Emergency Medical Services (Mississippi State Department of Health)

STATE OPIOID RESPONSE GRANT: TREATMENT ADMISSIONS FOR OPIOID USE DISORDERS

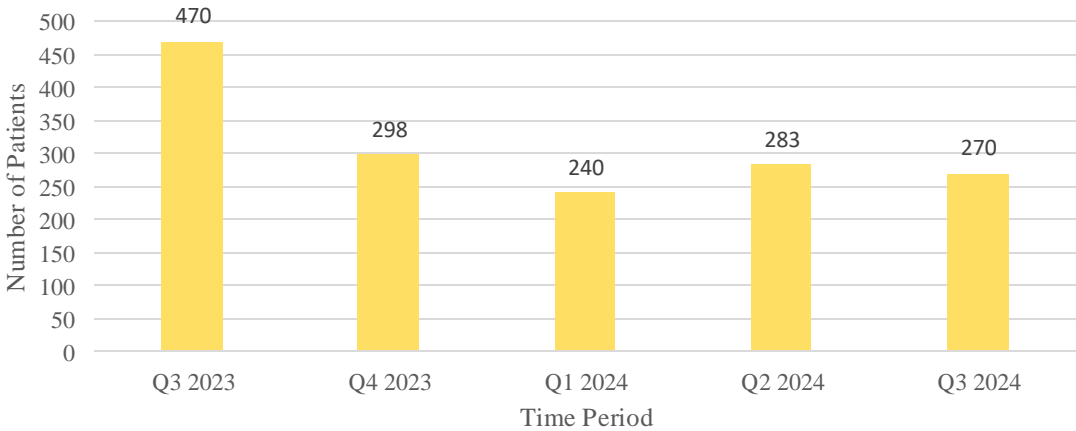
FINDINGS

- Table 2 and Figure 8 report opioid-related admissions to facilities certified by the Department of Mental Health (DMH). Data were collected from clients served by the State Opioid Response (SOR) grant, which provides funding for substance use treatment services at reduced or no cost to underinsured or uninsured people.
- A total of 2,181 (including those with poly-substance use) Mississippians were admitted in Q3 2024 to community mental health centers for all substance use disorders and 283 (see table 2) for opioid use disorders (includes primary, secondary, and tertiary).
- Opioids were listed as the primary diagnosis for 148 (6.79%) of the 2,181 unique patients admitted in Q3 2024.
- Figure 8 displays the total number of unique patients for whom opioids were a primary, secondary, or tertiary diagnosis. There was a 42.55% decrease in unique patients diagnosed with an opioid use disorder from Q3 2023 to Q3 2024.

Table 2: Unique Patients with Primary, Secondary or Tertiary Opioid Use Disorders

	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024
Primary	372	162	185	162	148
Secondary	81	90	11	73	81
Tertiary	17	46	44	48	41
Total	470	298	240	283	270

Figure 8: Total Unique Patients with Opioids as Primary, Secondary, or Tertiary Diagnosis, MS, Q3 2023 - Q3 2024



CONSIDERATIONS: The actual number of unique patients is a best estimate because patients can be admitted to multiple drug treatment programs, relapse, be re-admitted for a different treatment, or re-admitted in a different region.

NOTE: In July 2020, a transition occurred from the historical reporting system to a SAMHSA-recommended statewide reporting system that produces more accurate data. Therefore, some reported numbers may reflect admission and patient miscounting.

STATE OPIOID RESPONSE GRANT: SUBSTANCE USE DISORDER DIAGNOSES

FINDINGS

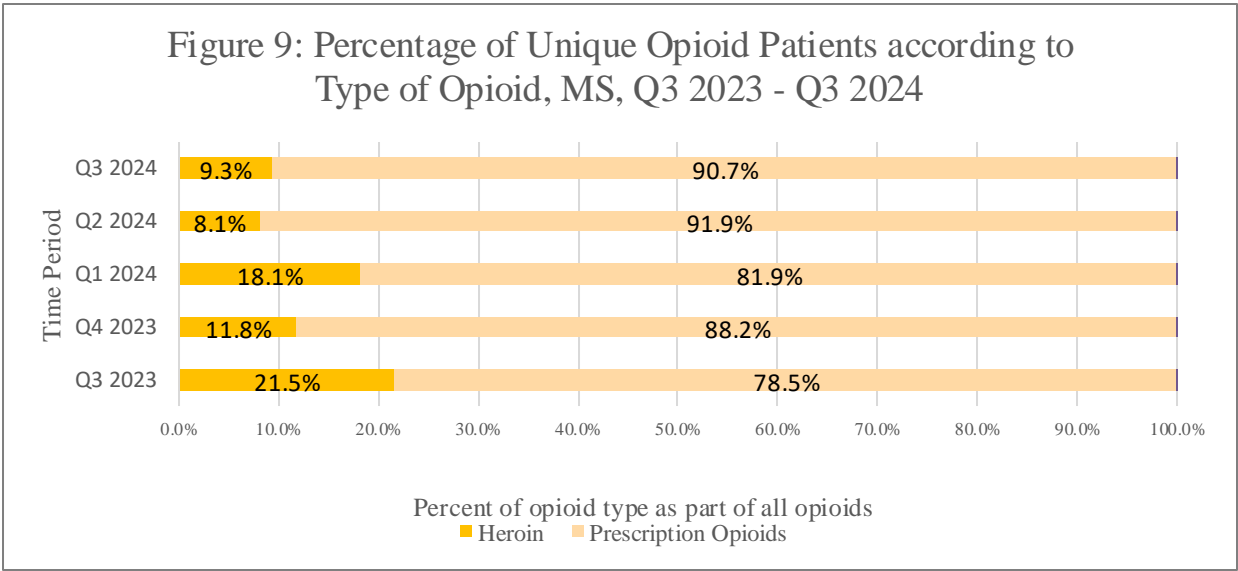
- This page reports all primary, secondary, and tertiary substance use diagnoses as reported by facilities certified by the Department of Mental Health (DMH). The data was collected from clients served by the State Opioid Response (SOR) grant, which provides funding for substance use treatment services at reduced or no cost to underinsured or uninsured people.
- Due to the limited population, the persons featured in this data source are not a representative sample of the state’s substance use or opioid use prevalence.
- In Q3 2024, 12.77% of all (primary, secondary, tertiary) substance use diagnoses were opioid-related.
- Compared to Q3 2023, the percentage of people with an opioid use disorder admitted with a heroin diagnosis decreased from Q3 2023 (129) to Q3 2024 (25) by 80.62%.
- The number of people admitted for opioid use disorders decreased from Q3 2023 (470) to Q3 2024 (244) by 48.09%.
- Due to the limited population, these data do not comprise a representative sample of the state’s substance use or opioid use prevalence. This population, however, does provide a stringent test of program effectiveness.

CONSIDERATIONS: The actual number of unique patients is a best estimate because patients can be admitted to multiple drug treatment programs, relapse, be re-admitted for a different treatment, or re-admitted in a different region.

NOTE: In July 2020, a transition occurred from the historical reporting system to a SAMHSA-recommended statewide reporting system that produces more accurate data. Therefore, some reported numbers may reflect admission and patient miscounting.

Table 3: Number of Unique Opioid Patients by Type of Opioid, MS, Q3 2023 – Q3 2024

Type of Drug	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024
Heroin	129	35	43	23	25
Prescription Opioids	470	262	194	260	244
Alcohol	291	432	484	484	473
Benzodiazepines	42	52	63	74	39
Cocaine/Crack Cocaine	229	231	243	215	222
Marijuana/Hashish/THC	74	595	663	618	593
Methamphetamine	360	499	522	500	511



DRUG-RELATED CRIME DATA

FINDINGS

Drug-Related Arrests:

- The total number of drug-related arrests reported in Q3 2023 was 4,648, which increased by 23.92% compared to Q3 2024 (5,760).
- In Q3 2024, an average of 64 drug-related arrests were reported each day in Mississippi..
- There were 195.26 drug-related arrests per 100,000 persons reported to MBN in Q3 2024.
- In Q3 2024, the highest numbers of drug-related arrests were reported in DeSoto (787), Hinds (773), and Harrison (501) counties. They accounted for 35.78% of all drug-related arrests in Mississippi.

Pharmacy Burglaries:

- In Q3 2024, there was 4 completed pharmacy burglaries which is an increase from Q3 2023 (1).
- There was a 300% increase in completed pharmacy burglaries from Q3 2023 to Q3 2024.

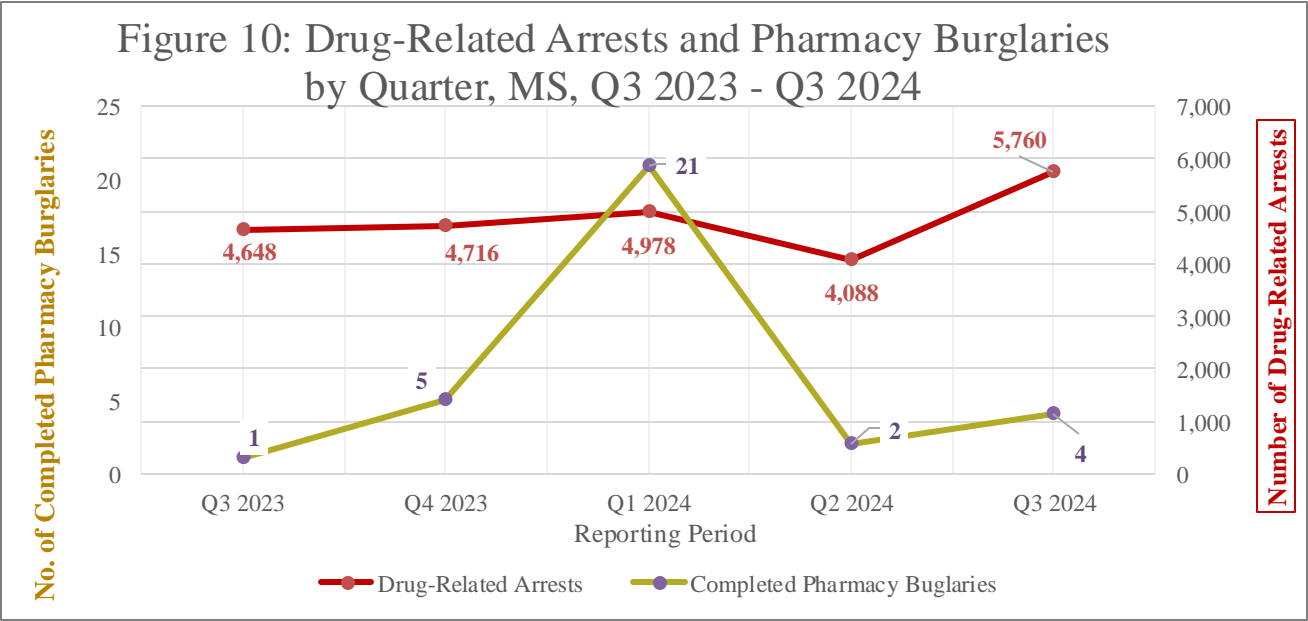
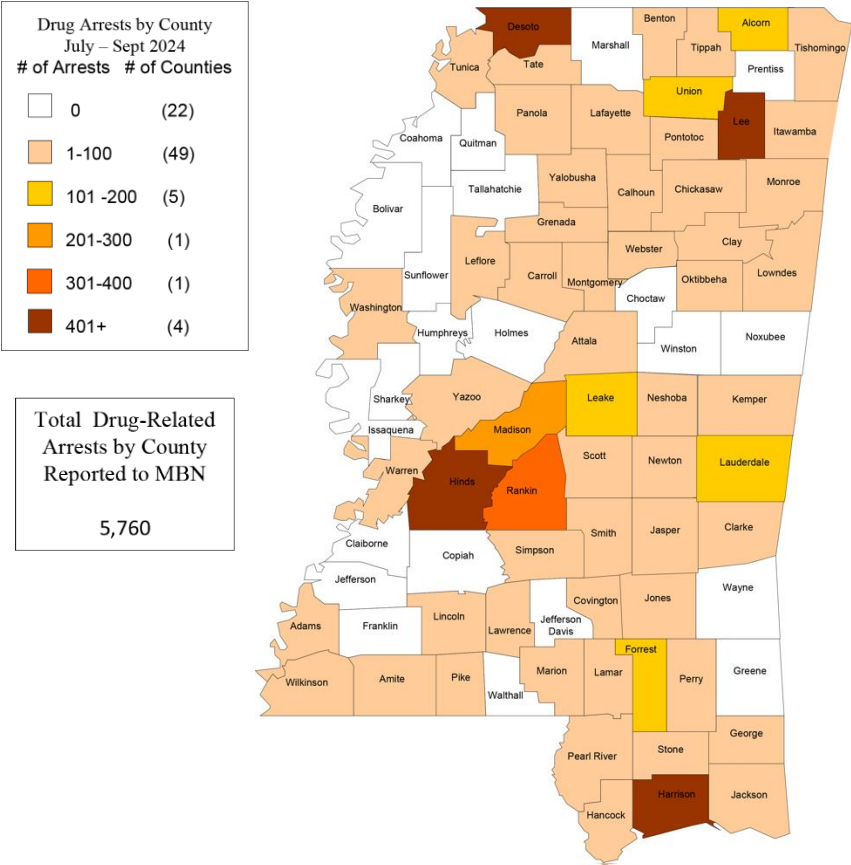


Figure 10b. Number of Drug-Related Arrests by County, MS, Q3 2024



DRUG TAKE BACK DAYS: MISSISSIPPI AND NATIONAL RESULTS

FINDINGS

- The Drug Enforcement Administration (DEA) holds a National Prescription Drug Take-Back Day each year in April and October to collect unused prescription medications. Since its inception, nearly 8.95 tons of drugs have been collected nationwide, with over 32.78 tons collected in Mississippi alone. (see Figure 11).
- In October 2024, a total of 6290,953 pounds of drugs were collected from 4,644 sites across the United States. During the same event, 3,437 pounds were collected from 46 sites in Mississippi. (see Figure 12).

Bay St. Louis PD	Biloxi PD	Brandon PD	Byram PD	Columbus PD	D'Iberville PD
Gulfport PD	Jackson PD Headquarters	Jackson Precinct 1	Jackson Precinct 2	Jackson Precinct 3	Jackson Precinct 4
Kemper Co. School District	Long Beach PD	Louisville PD	McComb PD	MHP- Batesville	MHP- Biloxi
MHP- Brookhaven	MHP- Hattiesburg	MHP- Jackson I-55	MHP- Meridian	MHP- Pearl	MHP- Starkville
MHP- Tupelo	Moss Point PD	Mississippi State University	Campus PD	Ocean Springs PD	Oxford PD
Pascagoula PD	Pass Christian PD	Pearl PD	Ridgeland PD	Smith Co. SD	Vicksburg PD
Waveland PD					

PD = Police Department , MHP = Mississippi Highway Patrol
SD= Sheriff's Department

Data Source: Drug Take Back Day (Drug Enforcement Agency)

Figure 11: Mississippi Prescription Drug Take Back Day Results: Number of Collection Sites and Weight Collected, Mississippi, October 2019-October 2024

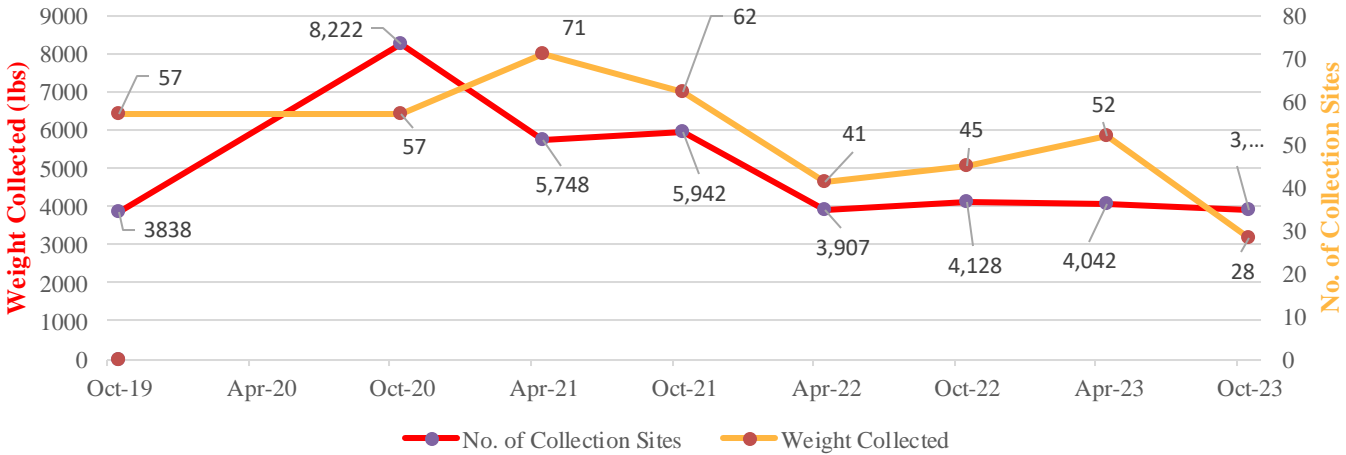
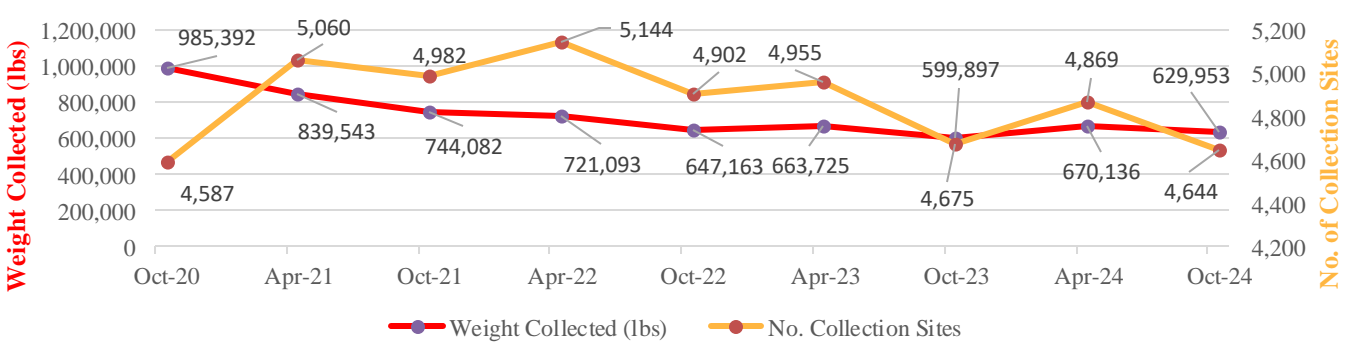


Figure 12. National Prescription Drug Take Back Day Results Number of Collection Sites and Weight Collected, United States October 2020- October 2024



COUNTY-LEVEL DATA: Q3 2024

Table 4. Number of Suspected Overdose Deaths, EMS Naloxone Administrations, and Drug-Related Arrests by County, MS, Q3 2024

County	Number of Suspected Overdose Deaths	Number of EMS Naloxone Administrations	Number of Reported Drug-Related Arrests	County	Number of Suspected Overdose Deaths	Number of EMS Naloxone Administrations	Number of Reported Drug-Related Arrests
Adams	3	*	29	Leflore	*	<5	3
Alcom	*	<5	163	Lincoln	*	6	89
Amite	*	*	17	Lowndes	*	<5	33
Attala	*	*	45	Madison	*	13	260
Benton	*	<5	9	Marion	*	<5	24
Bolivar	*	<5	*	Marshall	*	11	*
Calhoun	*	5	18	Monroe	1	8	80
Carroll	*	*	11	Montgomery	*	<5	33
Chickasaw	*	7	43	Neshoba	*	<5	59
Choctaw	*	<5	*	Newton	*	<5	2
Claiborne	*	*	*	Noxubee	*	<5	*
Clarke	*	<5	26	Oktibbeha	*	6	34
Clay	*	*	30	Panola	*	8	84
Coahoma	1	6	*	Pearl River	2	24	46
Copiah	*	*	*	Perry	*	<5	1
Covington	*	<5	21	Pike	*	14	1
DeSoto	8	36	787	Pontotoc	3	*	92
Forrest	1	20	149	Prentiss	*	7	*
Franklin	*	<5	*	Quitman	*	*	*
George	*	<5	13	Rankin	5	37	383
Greene	*	<5	*	Scott	1	<5	72
Grenada	1	5	59	Sharkey	*	<5	*
Hancock	*	11	82	Simpson	*	5	66
Harrison	10	87	501	Smith	*	<5	14
Hinds	1	56	773	Stone	*	<5	30
Holmes	*	*	*	Sunflower	*	<5	*
Humphreys	*	*	*	Tallahatchie	*	*	*
Issaquena	*	*	*	Tate	*	14	62
Itawamba	*	*	19	Tippah	*	6	48
Jackson	18	45	76	Tishomingo	2	*	56
Jasper	*	7	28	Tunica	*	6	16
Jefferson	*	*	*	Union	2	6	153
Jefferson Davis	*	<5	*	Walthall	*	*	*
Jones	*	23	72	Warren	*	12	65
Kemper	*	<5	12	Washington	*	<5	16
Lafayette	*	8	84	Wayne	*	*	*
Lamar	*	10	71	Webster	*	*	19
Lauderdale	*	58	187	Wilkinson	*	*	2
Lawrence	*	7	27	Winston	*	<5	*
Leake	*	*	101	Yalobusha	*	<5	5
Lee	2	<5	441	Yazoo	*	<5	18

Note: The asterisk * values in this table may signify either that cases of overdose deaths, naloxone administrations, and drug-related crimes have not occurred or that such cases did occur but were not reported by the relevant authorities.

Data Sources: Drug-Related Mortality (Mississippi Bureau of Narcotics), Mississippi Emergency Medical Services (Mississippi State Department of Health) (EMS Naloxone Administration counts from 1 to 4 subject to suppression under MSDH policy to protect privacy), and Drug-Related Crime (Mississippi Bureau of Narcotics)

SUSPECTED OVERDOSE DEATHS, EMS NALOXONE ADMINISTRATIONS, AND DRUG-RELATED ARRESTS

- Figure 13 displays the 9 districts used by the Mississippi Bureau of Narcotics (MBN).
- Table 5 shows the 5 districts with the highest rates of suspected nonfatal overdose deaths, EMS naloxone administrations, and drug-related arrests in Q3-2024.

Table 5. Rank of Counties: Rates of Drug-Related Arrests, EMS Naloxone Administrations, Suspected Overdose Deaths

Suspected Overdose Deaths per 100,000 Persons by MBN Public Safety District, MS, Q3-2024*

Suspected Overdose Deaths per 100,000 Persons by MBN Public Safety District, MS, Q3 2024		
Rank	MBN District	Suspected Overdose Deaths per 100,000 Persons
1	4	10.603
2	8	6.007
3	6	4.431
4	3	2.241
5	2	1.907
* Overdose death data for 2022 is pending due to lab results.		
EMS Naloxone Administrations per 100,000 Persons by MBN Public Safety District, MS, Q3 2024		
Rank	MBN District	Administrations per 100,000 Persons
1	6	38.11
2	8	34.02
3	3	22.92
4	7	20.74
5	1	20.08
Drug-Related Arrests per 100,000 Persons by MBN Public Safety District, MS, Q3 2024		
Rank	MBN District	Drug-Related Arrests per 100,000 Persons
1	4	608.05
2	6	397.93
3	8	289.37
4	9	268.86
5	3	256.5

Figure 13: Department of Public Safety Districts



Source: Mississippi Bureau of Narcotics

RATE OF SUSPECTED NONFATAL DRUG OVERDOSES FOR OPIOIDS, HEROIN, AND STIMULANTS (PER 100,000 PERSONS)

Table 6: Provisional Syndromic Surveillance Emergency Department Nonfatal Drug Overdose Data per 100,000

Suspected All Nonfatal Drug Overdoses per 100,000 Persons by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected All Nonfatal Drug Overdoses per 100,000 Persons
1	8	80.57
2	4	74.94
3	7	65.60
4	9	54.01
5	2	48.69
Suspected Nonfatal Heroin Overdoses per 100,000 Persons by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Heroin Overdoses per 100,000 Persons
1	7	----
2	6	----
3	4	----
4	8	----
5	2	----
Suspected Nonfatal Opioid Overdoses per 100,000 Persons by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Opioid Overdoses per 100,000 Persons
1	4	20.25
2	8	17.48
3	9	10.20
4	3	8.47
5	6	6.87
Suspected Nonfatal Stimulant Overdoses per 100,000 Persons by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Stimulant Overdoses per 100,000 Persons
1	8	4.82
2	4	3.91
3	7	2.61
4	9	----
5	1	1.41

Figure 14. Department of Public Safety Districts



Source: Mississippi Bureau of Narcotics

NUMBER OF SUSPECTED NONFATAL DRUG OVERDOSES FOR OPIOIDS, HEROIN, AND STIMULANTS

Table 7: Provisional Syndromic Surveillance Emergency Department Nonfatal Drug Overdose Data by Count, MS, Q3 2024

Suspected All Nonfatal Drug Overdoses by Count and by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected All Nonfatal Drug Overdoses by Count
1	8	401
2	1	258
3	4	211
4	7	201
5	3	171
Suspected Nonfatal Heroin Overdoses by Count and by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Heroin Overdoses by Count
1	7	<5
2	8	<5
3	4	<5
4	6	<5
5	2	<5
Suspected Nonfatal Opioid Overdoses by Count and by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Opioid Overdoses by Count
1	8	87
2	4	57
3	1	34
4	3	34
5	7	20
Suspected Nonfatal Stimulant Overdoses by Count and by Public Safety District, MS, Q3 2024		
Rank	Public Safety District	Suspected Nonfatal Stimulant Overdoses by Count
1	8	24
2	4	11
3	1	9
4	7	8
5	3	<5

Figure 15. Department of Public Safety Districts



Source: Mississippi Bureau of Narcotics

PROVISIONAL SYNDROMIC SURVEILLANCE EMERGENCY DEPARTMENT NONFATAL DRUG OVERDOSE

Table 8: Provisional Syndromic Surveillance Emergency Department Nonfatal Drug Overdose Data by Rate per 100,000 and by Count, MS, Q3 2024

Safety District 1 (pop. = 637,813)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	258	40.45
Heroin	0	0.00
Opioid	34	5.33
Stimulants	9	1.41
Safety District 2 (pop. = 211,558)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	103	48.69
Heroin	<5	----
Opioid	10	4.73
Stimulants	<5	----
Safety District 3 (pop. = 401,236)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	171	42.62
Heroin	0	0.00
Opioid	34	8.47
Stimulants	<5	----
Safety District 4 (pop. = 281,551)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	211	74.94
Heroin	<5	----
Opioid	57	20.25
Stimulants	11	3.91
Safety District 5 (pop. = 240,485)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	98	40.75
Heroin	0	0.00
Opioid	15	6.24
Stimulants	0	0.00

Figure 16. Department of Public
Safety Districts



Source: Mississippi Bureau of Narcotics

Safety District 6 (pop. = 232,753)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	113	48.55
Heroin	<5	----
Opioid	16	6.87
Stimulants	<5	----
Safety District 7 (pop. = 306,417)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	201	65.60
Heroin	<5	----
Opioid	20	6.53
Stimulants	8	2.61
Safety District 8 (pop. = 497,700)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	401	80.57
Heroin	<5	----
Opioid	87	17.48
Stimulants	24	4.82
Safety District 9 (pop. = 166,656)	Number of Nonfatal Overdoses	Rate of Nonfatal Overdoses per 100,000 Persons
All Drug	90	54.01
Heroin	0	0.00
Opioid	17	10.20
Stimulants	<5	----

Announcements and Special Interests

Fentanyl Test Strips

- **Fentanyl Test Strips:** Mississippi's governor, Tate Reeves, signed House Bill 722 to decriminalize possession of Fentanyl test strips beginning July 1, 2023. It is anticipated that this change will help to save lives of Mississippians by giving them a tool to test any drug suspected to contain Fentanyl, which is a powerful synthetic opioid that is responsible for approximately 70,000 overdose deaths annually.
 - Fentanyl is a synthetic opioid that is up to 50 times stronger than heroin and 100 times stronger than morphine. It is a major contributor to fatal and nonfatal overdoses in the U.S.¹
 - There are two types of fentanyl: **pharmaceutical fentanyl** and **illicitly manufactured fentanyl**. Both are considered synthetic opioids. Pharmaceutical fentanyl is prescribed by doctors to treat severe pain, especially after surgery and for advanced-stage cancer.
 - Illicitly manufactured fentanyl (IMF) is available on the drug market in different forms, including liquid and powder.¹
 - Fentanyl and other synthetic opioids are the most common drugs involved in overdose deaths.¹ Even in small doses, it can be deadly. **Over 150 Americans die every day from overdoses related to synthetic opioids like fentanyl.**²

ODFree.org

- <https://odfree.org> is a website created by the Mississippi Public Health Institute in partnership with the Mississippi State Department of Health and content provided through the MOHDC partnership to allow the general public to easily find information regarding:
 - Resources for:
 - Naloxone Information: Includes a link to order a dose of Naloxone to be delivered to your residence.
 - Drug Take Back: Provides the next scheduled DEA Drug Take Back Day with statistics from previous efforts.
 - Request A Town Hall: To discuss the opioid epidemic in the state of Mississippi and have an open forum conversation of how communities can get involved.
 - Pain on the Job: Discusses opioids in the workplace due to job-related injuries and the dangers involved.
 - International Overdose Awareness Day: Brings to light the information for the public to get an overview of just how far-reaching potential overdoses could happen.
 - Professional Resources: Provides links to important resources, such as, Mississippi Behavioral Health Learning Network, Peer Recovery Center of Excellence, National Institute on Drug Abuse Training, U.S. Drug Enforcement Agency Resources, CDC, and SAMHSA.

1. Wilson N, Kariisa M, Seth P, Smith H IV, Davis NL. Drug and Opioid-Involved Overdose Deaths — United States, 2017–2018. *MMWR Morb Mortal Wkly Rep* 2020;69:290–297.

DOI: <http://dx.doi.org/10.15585/mmwr.mm6911a4>.

2. NCHS, National Vital Statistics System. Estimates for 2020 are based on provisional data. Estimates for 2015–2019 are based on final data (available from: <https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm>).

THE MISSISSIPPI OPIOID AND HEROIN DATA COLLABORATIVE (MSOHDC)

PROJECT DESCRIPTION AND GOALS

Five state agencies have united to transform one of the most formidable drug-related challenges Mississippi has ever faced into an opportunity for developing data-driven policy changes aimed at combating the current opioid epidemic and preventing future drug-related crises.

GOALS

